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THE

Medical and Physical Journal.

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REMARKS ON THE DEATH OF ACADEMICUS'S CHILD.

To the Editors of the Medical and Physic[al] Journal.

Gentlemen,

THE second letter of Academicus, respecting the case of his child, inserted p. 516, vol. xiii. of your useful work, excited a considerable degree of interest in my mind, and led me to peruse his former letter, with Mr. Cuming's and Mr. Millett's, with closer attention than I formerly had done.

Upon a review of the whole case, I can see nothing to censure in the conduct and practice of B. D.; and if I did, I should not be satisfied, that I was invested with authority to condemn him.

Mr. Cuming appears to be nearly, though not altogether of my opinion, when he says, "Though delicacy *almost* forbids me to animadvert on the means adopted for the recovery of the child, yet a sense of duty imperiously stifles inferior considerations." One cannot but admire the firmness of Mr. C. when we see him, amidst the conflict of contending passions in his mind, giving the palm of Victory to *Duty*, instead of feebly resigning it into the hands of modest Delicacy. How happy would it be for individuals and the nation, if every public man would sacrifice his feelings to a *proper* "sense of duty." Mr. C. has not, however, favoured the public with a copy of the commission, which imposed upon him such an imperious duty; and therefore I am still at a loss to conjecture, what power delegated to him such authority.

Taking the statement of Academicus as perfectly correct; Mr. C. goes on to determine, ex cathedra, the cause of the disease, and then, notwithstanding the agreement of the physician and apothecary who attended the child, indirectly

indirectly condemns their practice, and very modestly proposes his own.

It appears, on the second day of the disease, the child had so much debility, that Academicus says, "his sleep was seemingly comatose," and yet "in such cases as these" Mr. C. informs us, "he has often had recourse to the warm bath, keeping the child in it until it became faint." But it may still be doubted, whether this plan would have succeeded better than that which was pursued.

Notwithstanding Mr. C. seems very *certain* that obstructed perspiration was the sole cause of the disease, it is not quite clear that worms in the alimentary canal may not have occasioned both the fever and green stools.

Does not also the "moaning for hours," on the night after the attack, naturally suggest, at least, the possibility that there may have been some affection of the brain, which terminated in hydrocephalus internus; especially when we consider, that the coma increased, and repeated convulsions took place, before the dissolution of the child? Indeed, Mr. Cuming himself is of opinion, that "the fatal symptoms of coma and convulsions, which closed the scene of this child's illness, might have been occasioned by hydrocephalus." If that was the fact, the possibility is, that inflammation of the brain very early supervened, if it was not the primary disease.

Mr. C. very properly observes, that the "connection which subsists between the bowels and the skin is very striking; when the pores are obstructed, diarrhœa or fever, for the most part supervenes, and is frequently attended with sickness or vomiting." In this case, however, we are not informed that either sickness or vomiting took place. It may, therefore, reasonably be doubted, whether obstructed perspiration was the cause of the disease, and whether an emetic and sudorifics would have been more beneficial than the medicines exhibited by B. D.

I like the reasoning of B. D. upon this point very much. He tell us he gave no emetic. 1st. "Because there was no sickness nor nausea." 2dly. Because Nature had pointed out the path to be pursued." Now, as B. D. was on the spot, and saw the child very early in the disease, he had certainly the best opportunity of noticing the way which Nature took to relieve herself of the injury, however incurred: and being the confidential apothecary of this family, I conclude, that he possessed, even in the judgment of Academicus himself, a competent share of professional ability to decide, both as to the nature of the disorder, and the best method of treating it.

Nothing

Nothing can exceed the good sense with which Mr. Millett, junr. writes on the subject; in his letter (page 51, vol. 12.) the wisdom of an enlightened practitioner and the candour of a gentleman are both very conspicuous, and cannot fail in pleasing every liberal and impartial reader.

It is much to be lamented, that an unsuccessful case should destroy Academicus's good opinion of a "confidential practitioner;" and it is no less painful to observe how very anxious he seems (p. 516 and 517, vol. xiii.) to criminate the conduct of B. D. and to impeach his judgment.

Upon the whole of the circumstances taken together, allow me to make a few observations.

1st. It is very desirable, in all doubtful cases, to have the body examined soon after death. Had this child been opened, something might have been discovered that might have satisfied the mind of Academicus, that *even an emetic* could not have saved his life.

2dly. It is very unreasonable to judge of a practitioner's skill by the fatal termination of a disease. "Medical men are certainly the instruments towards the recovery of people from sickness;" but it should always be remembered, that they are *only* instruments. Diseases can be removed by him alone, who inflicts them. But as he employs instruments in bringing on any disease, so also he makes use of them in taking them away. Medical men cannot be expected to work miracles, and therefore should not hastily be blamed when their exertions are not attended with the desired success. But as, without means, we are not warranted in expecting a divine interposition; it is our duty to use such as human wisdom and experience justify us in employing. But depending solely upon the means we use, without imploring the divine blessing, is presumption: So that when one hears another say, (page 568, vol. xiii.) "Except in cases of a natural or artificial old age, or, in other words, when the constitution has been exhausted either by intemperance or by time, no person *ought* to die of Fever;" one naturally believes, that as "dead flies cause the ointment of the apothecary to send forth a stinking savour, so doth a *little folly* him that is in reputation for wisdom and honour."

3dly. The knowledge of medicine, possessed by persons out of the profession, generally does them more harm than good. A gentleman may certainly read on medical subjects, till he understands much in theory; and yet not be

be able to apply his knowledge to one good practical purpose. Just as he may, by reading Blackstone's Commentaries, thoroughly understand the British constitution, and yet make a very bad lawyer or statesman. Practice alone can produce that sagacity in discriminating, and that decision in treating diseases, which are so essential to insure success. Every practitioner remembers, notwithstanding the stock of theoretic knowledge he brought with him from the University and Hospitals, what doubts and fears have filled his mind when first called, in private practice, to the sick beds of his valued friends or endeared relatives; and what wavering and indeterminate conduct characterized the treatment of his early patients. How then can gentlemen, who, like Academicus, study medicine as an accomplishment, be competent to decide on the nature of diseases, or the best mode of treating them? Affection will alarm where there is no danger; and the want of sagacity and promptness will often render the disorder fatal. Such persons should always employ a "confidential practitioner," and suffer his own judgment to be subordinate to his friend's. Most medical men are so aware of the propriety of this conduct, that they usually commit themselves and families, when sick, to the judgment and care of their brethren in the Faculty.

Lastly, It is our duty, when we are bereaved of our dearest relatives, to bear our loss with becoming submission to the Divine Will. The propensity there generally is in survivors to blame the medical attendants, when their friends or relations die, is both ungrateful and sinful. The largest sum of money (generally small enough) is a poor compensation to a man of a liberal education and refined feelings; when his assiduity, time, council, patience, and kindness, are returned with the most stinging and mortifying reflections; merely, because the event, which he could not controul, has been contrary to his warmest wishes. Surely, gratitude is due to a professional man, whatever be his success, unless he can be fairly charged with wilful neglect, or *indisputable* and gross mistakes.

This propensity to condemn the conduct of medical men is sinful, inasmuch, as it discovers a murmuring and discontented spirit; and is, in effect, if not in words, "charging God foolishly."

Academicus, probably, is a clergyman; if not, he is doubtless a gentleman of education and refinement. Whilst, therefore, I most tenderly sympathize with him, on the loss of a beloved child, I cannot but hope, that his good

good sense will induce him, upon mature reflection, to repose again in Mr. B. D. the confidence his family formerly placed in him. He will also, it is hoped, not perplex his mind, with imaginary cases and modes of cure, by reading medical books on the diseases of children; but will charitably conclude that the physician and Mr. B. D. did all that his child's case required, or that human means could effect. I am, &c.

Kidderminster, June 17, 1805. GEORGE CUSTANCE.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

FROM a thorough conviction of the utility and importance of the vaccinating system, I have been one of its earliest and most strenuous advocates. I have myself inoculated upwards of five thousand, and have supplied the virus to other practitioners to a great extent.

Yet, as truth is my only object, I take the earliest opportunity of informing you, that two of my patients, who went through the disease in the most satisfactory manner, one nearly five years ago, and the other about a year and a half since, have recently undergone a decided natural small-pox.

How far two instances out of five thousand, are to be considered as an argument against the cow-pock, it is not my intention to discuss here; I simply state the fact for the consideration of my professional brethren.

I am, &c.

No. 75, Grosvenor Street, June 21, 1805. J. GRIFFITHS.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

DR. MOSELEY has lately published a pamphlet, in which he asserts, that a child of Mr. Curling, in George Street, Portland Chapel, vaccinated by me, has since had the small-pox. The fact is, that the child had a disorder attended with a slight eruption, which Mrs. Curling sup-

posed to be the small-pox; but having carried the child to Mr. Leighton, of Welbeck Street, and Mr. Draper, of Bulstrode Street, they both declared it to be the chicken-pox. On this account the case was never communicated to me; nor should I have known it now, but from Dr. Moseley's publication.

Dr. Moseley seems not to be very difficult of conviction on such occasions; for having called on Mrs. Curling, and asked her whether her child had the small-pox after the cow-pock, she answered, that he had, according to her opinion, but that she was not certain; to which Dr. Moseley immediately answered, there was not a doubt of it, for many others had the same.

The case alluded to in the third paragraph of Dr. Moseley's pamphlet, p. 129, I have authority from the family to say, is a misrepresentation of the fact; and the doctor must have received wrong information.

From these, and other circumstances, I am inclined to believe, that the cases published in Dr. Moseley's pamphlet are in general ill-founded; and that he has been too ready to believe what agreed with his pre-conceived hypothesis; but I shall, hereafter, express my sentiments on this subject more fully, in another form.

False alarms are daily spread, concerning vaccination; but there are others which deserve attention. The following is the first instance in which I have ever seen a failure in my own practice; and a clear case of the small-pox after the cow-pock.—A child of Mr. Fairbrother, in Exeter Street, Brompton, vaccinated by me about two years ago, has at this time the remains of a pustulous eruption, which appeared to be variolous, and was in some degree confluent; but it turned on the sixth day, and is rapidly disappearing. Many of those eruptions which first appeared, had vanished by the sixth day; and the complaint has proved more favourable than could be expected.

When this child was vaccinated, which was about two years ago, he laboured under the tinea capitis, which, sometimes, occasions an irregularity in the vesicle; but nothing of that kind was observable in the present instance. I am therefore inclined to suppose, that the morbid action already existing in the habit, partly, or entirely, prevented the vaccine vesicle from producing its full effect on the constitution.

Instances of local cow-pock are already recorded; one of them occurred at the Vaccine Pock Institution, another in the practice of Mr. Forbes; this is the first that has fallen under my observation. Such cases are uncommon;

and occur in variolous, as well as in vaccine inoculation. Hence, the late Dr. Heberden remarks, in his Medical Commentaries, that those persons who have no eruption, after variolous inoculation, and only a pustule on the arm, are not secure from future infection.

The real failures, either in vaccine or variolous inoculation, are certainly but few, in comparison of the number supposed to occur; but errors in both kinds of inoculation are undoubtedly frequent. In the last number of your Journal, I communicated the case of a child in Edgware Road, who has had the small-pox after supposed vaccination. The mother of the child informed me, that her grandfather and grandmother were inoculated for the small-pox, and supposed to have had it regularly; yet, they both afterwards died of that disease.

The following case was lately communicated to me by the Rev. Mr. Jenner.—Miss Price, niece to Mr. Whitebrook, wine-cooper, in Greek Street, Soho, was inoculated for the small-pox, when an infant, by the late Dr. Barwis of Devizes, at the time of a general inoculation in that town. She had the disease in a satisfactory manner; and some marks of it are still visible in her face. About two months ago she sickened with the natural small-pox, and had a pretty full eruption. She had the chicken-pox when a child; but independent of this circumstance, it is not probable a mistake should have been committed, with regard to the matter used in inoculation, when the small-pox prevailed in the town where she resided.

I am, &c.

New Street, Hanover Square. JOHN RING.

An Account of Resuscitation, in a Case of supposed Death from Yellow Fever; by John Rush, M. D. *of Philadelphia.*

IN the month of August of the year 1798, the yellow fever appeared in Marcus Hook, a small village situated on the banks of the river Delaware. The crews of the United States vessels Ganges and Retaliation, which lay along-side of the village, were at the same time attacked with this disease. Upon the first indisposition, each person was removed from the vessels and conveyed to tents fitted up for his reception, on an elevated and healthy spot of ground in the neighbourhood; where, through the hu-

mane attentions of his commander, he was provided with every necessary that his situation required.

Out of sixty seamen, ordinary seamen, and marines, who had been sent to the tents, many had the disease mildly, some suffered severely, and four died, on the third, fifth, and seventh days, with black vomiting and other symptoms of great malignity. Of the whole number, I have selected a case, which, from the rareness of its occurrence, may be interesting and important.

The particular symptoms that marked the progress of the disease in this case, from the apparent cessation of life to its complete resuscitation, I am unable to state, owing to the circumstance of the daily journal remaining in the possession of my assistant Mr. Parker, after he had retired from the United States' service. What I observed at the time of my visits, which through necessity were short and few, I have correctly stated, and have no reason for doubting the truth of what is farther advanced, from the representation of Mr. Parker.

CASE.

James Clark, an ordinary seaman belonging to the Ganges, about nineteen years of age and of a hale constitution, was attacked on the seventh of September with the yellow fever. The symptoms were such as characterize the malignant forms of this disease. The force of the disease seemed principally exerted on the arterial system, while the muscular and nervous systems appeared to be but secondarily affected. The pulse was depressed at the commencement of the attack, but rose soon afterwards, and became full and strong. Twenty-four oz. of blood, in all, were taken from his arm in the first paroxysm; during which, he was copiously purged with strong doses of calomel. On the second day bleeding and purging were discontinued, and mercurial frictions, together with small and repeated doses of calomel, were prescribed, in order to produce a salivation. This, however, could not be effected. The disease, notwithstanding the use of a variety of stimulants, such as brandy, ether, and laudanum, arrived at the last stage, when, on the morning of the fourth day, the black vomiting began and continued until twelve o'clock at noon; at which time, it was said, he had expired. Upon paying my second visit to the tents, at four o'clock in the afternoon of the same day, I saw the body of Clark lying in a coffin and apparently lifeless. On closely examining it, I observed the pale yellow, that previously tinged

tinged the temples, nails and neck, changed to an orange-like hue, and interspersed with purplish spots resembling petechiæ: neither pulse nor heat were perceptible, nor was respiration discoverable on the mirror, which was held before the mouth. Putrefaction, however, had not taken place; the lower jaw was still flexible; and upon a more minute examination, I felt (or thought I felt,) a slight warmth about the epigastric region. With such slender and evanescent symptoms of life, experiment indeed promised little. But something I was resolved to attempt: I therefore ordered the body to be covered with warm ashes from the cook's fire, and a gill of very strong brandy toddy to be poured down the throat every half hour. Being called away, I could not wait to see the effect of these remedies; but requested Mr. Parker to continue the use of them, whilst any hope remained of their being successful. On my return at sunrise the following morning, I had the pleasure to find Clark propped up, indulging himself with soup. From Mr. Parker I learned, that about eight o'clock, after he had received a quart of brandy, he began to respire; that the brandy was continued in the same proportion which I had prescribed, until eleven o'clock, when he was so far recovered, as to complain of the warmth of the ashes? that he was then taken out of the coffin, and laid on straw on the ground. Port wine sangree was then substituted for brandy, and was regularly administered until day light, when he refused to take any more, and called for food.

On the treatment of the above case, it may be proper to remark, that had convulsions or spasms attended the apparent dissolution, I should have hesitated in pouring a fluid down the throat; as, when death occurs in convulsions, the glottis might not be completely closed, while the muscles of the epiglottis, partaking also of the general convulsion, might retain it in an erect position: hence a fluid would pass into the lungs, as well as into the stomach, a circumstance which would prevent resuscitation. But in cases like Clark's, where muscular relaxation accompanied the apparent extinction of life, the epiglottis must necessarily be in contact with the glottis, and thereby prevent the admission of a fluid into the lungs.

If the history of the above case should serve to prevent premature interment, and lead to the use of remedies for resuscitation in doubtful cases of death from fever, as well as from causes which induce it suddenly, it will be to me a high gratification.

Aug. 17, 1804.

An

An Account of the Efficacy of Sugar of Lead in curing Epilepsy. By BENJAMIN RUSH, M. D. *of Philadelphia.*

ABOUT four years ago, Mrs. Toy, of Southwark, brought her son to me, a boy of ten years old, who, she said, had been afflicted for some time with epileptic fits. I prescribed for him a pill of two grains of the acetate, commonly called sugar of lead, three times a day. In a few months it perfectly cured him, and I had the pleasure of hearing a few months ago, that he has continued ever since to enjoy good health.

In the year 1802, I cured a boy of Mr. Robert E. Hobart of the same disease, by the use of the same dose of the same remedy. This boy was of a full habit. Previously to his taking the medicine, I drew eight ounces of blood from his arm, in order to increase the effect of the medicine, agreeably to the practice of Dr. Sydenham in a similar disease.

I am now administering it to a boy of Mr. Adam Stricker, aged twelve years, in a low grade of epilepsy which had affected him for some months. It has prevented a return of his fits nearly two months; and I am disposed to believe it will finally cure him.

I have used the sugar of lead in several cases of epilepsy in adults. In one of them it suspended the fits for several weeks, but I am sorry to add, in no case did it perform a cure.

The epilepsy is not singular in yielding to medicines under puberty, which have little or no effect in adult age. Pulmonary consumption, chronic eruptions upon the head, scrophula, the chorea sancti Viti, and several other diseases, are often cured under puberty by remedies, which are ineffectual after the one-and-twentieth year of life.

Considering how often epilepsy, and other convulsive diseases, make their first appearance in childhood, and under puberty, it is consoling to reflect that we are possessed of a medicine which promisss to be useful in them.

Lest it should be supposed, the change which puberty makes in the system concurred in the cure of the above cases, it may not be amiss to add, that two of the subjects of them were under twelve, and the other between twelve and thirteen years of age.

I was first led to prescribe the sugar of lead in the epilepsy, by hearing that a man had been cured of it by swallowing part of a table spoonful of white lead by mistake, instead of a table spoonful of loaf sugar.

August 2, 1804.

OBSERVATIONS

Observations on the Management and Preservation of the Eyes. *Communicated by* Dr. Lang, *of Newman Street, Oxford Road.*

IN a Treatise on the Disorders of the Eyes, which I read lately, there was mentioned *obiter*, that if luminous rays fall on the pupil of one eye only, that of the other, which is not at all exposed to them, will however contract itself in some degree, though not quite so much as the former. This put me in mind of some remarks I had heard of the celebrated Dr. Schimdt, at Vienna, when I attended his practical institution, shewing at the same time, that they were not so universally known as I should have imagined them to be. As they are of some practical moment, I venture to offer them to you for insertion in your valuable publication, if you should think them worthy of a place therein.

Dr. Schmidt, like the author of the above mentioned Treatise (the Title of which I am not able to recollect) observed at first, only the fact I have cited; but upon further investigation he found, that the reverse of it is equally certain to happen under the contrary circumstances, viz. if you deprive one eye of the influence of luminous rays, and by that means dilate its pupil, that of the other eye, which is still under the effects of light, will dilate itself likewise in some degree, and in proportion to the dilatation of the former. These two facts point out more clearly the sympathy and close connection of our organs of sight, and in my opinion, contribute very much to evince the position, that in the *chiasma nervorum opticorum*, the substance of the optical nerves is really and effectually incorporated together, and that those nerves do not decussate one over or through the other. As this, however, is more related to speculation than to any thing else, I shall not enter into the subject, but proceed to other conclusions to be drawn from the stated facts, concerning the management and preservation of our eyes.

It is universally known, that the pupils become contracted in proportion to the light falling on their *retinas*; and if there are many rays acting on the retina, the pupil will contract itself, until so many only are permitted to pass as are sufficient to form a distinct image of the object we behold, without dazzling the eye. On the contrary, the pupil dilates itself in the dark to a great degree, to permit every atom of light to make its way to the *retina*. Now in using a single perspective, or eye-glass, the generality

generality of people are in the habit of applying it to the same eye, and at the same time of shutting the other. According to Dr. Schmidt's observations, the necessary consequence must be, that the pupil of that eye, to which the glass is applied, is considerably more enlarged than it ought to be in proportion of the light acting upon its *retina*, because of the enlargement of the pupil of the other eye, which is shut, and consequently in the dark, occasioning the pupil of the open eye to dilate itself. This accounts partly for the uneasiness we feel, when we have for some time looked through a glass with one eye shut; though the indistinct image we receive through the means of glasses has likewise a share in it, and that uneasiness in a convex eye can therefore never be entirely obviated. To avert, at least, as many ill consequences as possible from the use of perspectives, we should not only employ *achromatic* glasses, but, for the sake of this sympathic enlargement of the pupils, we ought to make use of a double perspective, or *binoculum*, as the opticians call it; and if such a one is not to be procured, we should always keep the other eye at least *half* open. The reason why it must not be quite opened, is, because the other eye, with which we look through the glass, would, on account of the sympathetic contraction of the pupils, not receive so much light as that which is quite uncovered, and of course we should be subject to the contrary disadvantage.

For the purpose of having more light, and in order not to have this light overshadowed by our own hand, we commonly place our writing desks with the left side to the window, or to the light in general, as most people write with the right hand. But this produces, though in a less degree, the same consequences as the common use of perspectives; for although the rays, reflected from that material on which we write, will almost equally affect both our eyes, yet those additional rays, which we receive through the window, or from a luminous body at our left side, can only affect our left eye, as the ridge of the nose will hinder them from entering our right eye. Hence the pupil of the latter must be more contracted, as it should be, by the rays it receives, and accordingly we endeavour (though imperceptibly to ourselves, from want of attention) to adjust that eye better and better to the smaller quantity of light it receives, in opposition to the re-action of the left eye. The consequences of this are easily to be drawn; if both eyes are sound, the sight of the left will by and by be far inferior to that of the right, because this latter

latter is more in the habit to be closer employed, and it is, by the like diameter of the pupil, easier to be affected from the same quantity of light than the former, which is accustomed to a greater quantity of it; if, on the contrary, the eyes are naturally weak, they will both become in a much less time short-sighted than in a better situation, as the unequal affection of them will mutually and alternately contribute to accelerate that event. To prevent this, it will be adviseable to place ourselves in writing, or any similar occupation, with our face *before* a window, that we may have the light in front; and if we are obliged to make use of artificial light, we must place it likewise in front of ourselves, and effect, by means of a screen of nearly transparent paper, its equal distribution before our eyes.

It may also be observed here, that we do not, by far, take sufficient care of our eyes with respect to the manner of lighting our apartments, and especially, when we are writing, reading, &c. In the first place, we do not give light enough, which induces us, secondly, to have our candles so low, that the flame of them is constantly fluttering before our eyes. It is evident, that no one of the objects around us can give so bright a light as the candle itself, as they all borrow their light from it; consequently, if we have a candle before us, whose flame is not above our horizon, and we look at another object, not only the luminous rays refracted from that, but also a quantity of rays, emanating from the candle, must touch our eyes. The pupil, therefore, will be much more contracted, as it ought to be, by virtue of the *refracted rays*, which produce an indistinct and imperfect image of the object we are really looking at. But this indistinctness generates not only an uneasiness in our mind, but we also endeavour to correct it, by pinching our eyes with the eyelids, retracting and protruding them, and, in short, making various trials to effect a distinct image, when the organ is soon tired out, and we are obliged to let it rest. Here every body exclaims, it is the easiest matter in the world to avoid this, if you only place a green shade over your eyes. But, however, there is another preventive, which is, in my opinion, still easier, and more efficacious, without having the disadvantages of a shade, namely, if we augment the light, and elevate it so much, that it is above our horizon. It is true, the shade obstructs the rays of the candle, but then we shall frequently be obliged to turn from our work, when the light of the candle will, on a sudden, start in our eyes; and every one knows, how very hurtful sudden changes

changes of a weak and strong light are to the sight. Moreover, if the light is very low, it will be concentrated almost upon one spot; and as the ground on which we work is generally of a white colour (as paper, linen, &c.) the strong reflection will dazzle our eyes so much, that we must take considerable pains to observe the very work we are doing. If it was not for the high price, I should recommend for the above desired purposes *Argand's* lamps, which unite every conveniency in themselves, if they are suspended high enough, as they give a sufficiently strong and equal light, being at the same time sufficiently above the horizon of our eyes.

June 9, 1805.

Report of Diseases in the public and private Practice of one of the Physicians of the Finsbury Dispensary, from the 20th of May, to the 20th of June.

Amaurosis - - - -	1	Hysteria - - - - -	2
Paralysis - - - -	4	Hypochondriasis - -	4
Insania - - - - - -	1	Epilepsia - - - -	1
Rheumatismus - - -	23	Chorea sancti vitæ - -	1
Catarrhus - - - -	11	Colica Pictonum -	2
Febricula - - - -	7	Hydrops - - - - -	6
Amenorrhœa - - -	13	Asthenia - - - - -	15
Menorrhagia - - -	5	Morbi Infantiles - -	19
Leucorrhœa - - -	3	Morbi Cutanei - - -	17

In consequence of the suggestion of a professional friend, in whose judgment, as well as candour, he has an entire confidence, the Reporter is induced, before he makes any remarks upon the diseases of the last month, to explain a proposition which was made by him in the preceding number of this Journal, with regard to the cure and management of fever.

The writer of that article did not mean to say, that in all cases, or in the greater number, when a patient dies of fever, it must inevitably be owing to an error of the medical attendant. He wished merely to express his firm conviction, that, where the excitability had not been previously exhausted by years, or by habits of intemperance or indiscretion, a person who, from the *first feeling* of a febrile attack, was properly managed and attended to, (which, by the way, depends as much on the patient himself, his friends, or his nurse, as on his physician) would never fall a victim to the complaint.

When

When the assertor of this opinion shall meet, in his practice, with a fact that opposes it, he pledges himself to recant his faith, and to publish, without any colouring or mutilation, the actual circumstances of the case.

The fatal error consists in hesitating to apply for any advice, until that period of a disease when the best advice is often of no avail. "For want of timely care, millions have died of medicable wounds."

A remarkable instance of dimness of sight, that has for some months past been gradually approaching towards absolute blindness, which indeed has actually taken place in one of the eyes, is at present under the Reporter's care. The patient first perceived it the day after she had been frightened by a violent paroxysm of epilepsy with which her husband was attacked in the night. Since that time, although never in the least so before, she has herself become extremely liable to fits, and is apt to fall down insensible, upon occasions of the slightest degree of surprise or agitation. Her complaint seems to consist not in an injured structure of the eye, but in a debility of the nervous system in general, that *appears* more particularly in that delicate and exquisitely-irritable part of it which is destined for the purpose of vision. It is, of course, not a case for *surgical*, but *medical*, treatment*.

She already begins to feel an alleviation of her complaint. She says, that "she can bear the light of the sun better." Before, she was scarcely able to see at all, unless when in the house, or in some other way sheltered from the glare of the solar rays. The capacity of seeing with the eye that is not altogether blind is intermittent, "going and coming," to use her own metaphor, "like the sun when a cloud passes over it." The patient has likewise been liable to a deafness, that may be traced to the same circumstance as gave rise to her ophthalmic malady. Her hearing is in a great measure restored, which affords an agreeable

* Such distinctions, although for the most part they ought to be observed, may, sometimes, be carried to an absurd and ludicrous extent. At Calais, about three years ago, as the writer was walking upon the sands of the shore, a particle from them lodged itself under his upper eye-lid. Happening, at the moment of the accident, to be near a shop that wore a pharmaceutical physiognomy, he entered, and requested the person whom he saw there to remove the troublesome intruder, by means of the feather of a quill that was lying upon his desk. The performance of this operation, however, he scrupulously declined. Je vous demande pardonne, nous sommes chymiste, pas chirurgiens, il n'est pas à nous *d'operer*.

agreeable presage with regard to the ultimate recovery of her sight; both having a common origin, and, alike, symptoms of nervous debility or derangement.

One of the seven men who lately fell, as stated in the newspapers, from a scaffold in Thames-street, died upon the spot. In consequence of the horror which this accident excited in a near female relation, who was, before, in a weak and irritable state, she was seized with a paralytic affection of all her limbs. She is now a patient of the Dispensary.

This fact occurring only a few days after the one just stated, strongly co-operates with it, in demonstrating not the unlimited, but the important and incalculable, power which the mental faculties and sensations possess over the feelings and energies of the body.

In addition to the two instances already mentioned, tending to display the ascendancy of the mind over our material organization, the Reporter has a third case to relate, which likewise came under his cognizance, a very short time ago, in which a derangement of the body produced a corresponding disorder in the power and perspicacity of the understanding. It occurred at one of those critical periods of life, at which the female sex are particularly liable to an anomalous variety of diseases, especially to those to which there is any hereditary or constitutional propensity.

The poor woman fancied that she saw her bed encompassed with a legion of devils, impatient to hurry her to eternal torments. She derided medicine, and obstinately and haughtily resisted its application. In a very short time, however, an alteration having taken place in her physical condition, she repented of her folly, and smiled at the mention of her former terrors.

To so humiliating a degree do the floating particles of matter which surround, and still more those which enter into, the interior composition of our frame, exhibit their influence in exciting, repressing, or disordering the phenomena of human intelligence.

"Toi qui dans ta folie prends arrogamment le titre de *Roi de la Nature*; toi qui mesures et la terre et les cieux; toi, pour qui ta vanité s'imagine que le tout a été fait, parce que tu es intelligent, il ne faut qu'un léger accident, qu'un atome déplacée, pour te faire perir, pour te dégrader, pour te ravir cette intelligence, dont tu parois si fier."

Greville Street, Brunswick Square, June 21, 1805. J. REID.

To Dr. BRADLEY.

SIR,

HAVING lately met with a case, which, as far as my reading or practice extends, is without its parallel, I take the liberty of communicating it to you, with leave to make it public or not, as you may think it merits the attention of the profession.

On Friday, April 27, 1804, I received a note from my friend, Mr. Cooper, an intelligent practitioner in this neighbourhood, requesting my assistance "in a very serious midwifery case." I found the woman (who had been in labour from Tuesday evening) with *strong forcing* pains, returning at short intervals. Mr. Cooper informed me, that she had been delivered of a child about nine years before; but that as there was something *extremely singular* in this case at present, he wished me to make my own observations, and to form my opinion *solely*, from such circumstances as I should observe on examination; without any bias or prejudice from his relation of it.

On examining, I found a large and hard tumour pressing very low down and covered by an unusual substance, which felt soft and uneven to the touch, and the projection of the os sacrum was much more plainly perceived than in a common examination per vaginam; yet by the yielding of the bones to a moderately firm pressure, there was but little doubt of its being the head of a child, and I could also feel the sutures, though but indistinctly. The first idea that suggested itself was, that of its being an extra-uterine fœtus; but the head was propelled too low within the brim of the pelvis, and pressed down too forcibly during the pains, to admit of this idea for a moment; and as neither the *os uteri* nor the *arch of the pubis* were to be felt, it rendered the case still more obscure, at the same time that it strengthened the opinion that it could not be extra-uterine. In order therefore to make the examination more perfect, and to ascertain as accurately as possible the precise nature of the case, I attempted to pass the index of the left hand *per anum*, whilst I continued that of the right in the vagina, when, to my very great surprise, I found that my right index was already in the anus. This at once explained the reason why I felt the sacrum so plainly, and that the membrane covering the head must be the intestinum rectum and vagina; and it satisfactorily accounted for the not being able

to discover the os uteri or arch of the pubis. I now endeavoured to make the examination in the usual direction, but with more caution; and after repeated attempts I found that the finger passed *readily* into the rectum in every trial.

I *now* learned from Mr. Cooper, that the same circumstance had constantly happened to him during the whole time he had attended the woman, and he had no doubt but the opinion I had formed of the vagina being imperforated was perfectly just; for that some years since he was consulted by this patient for a suppression of urine, when it became necessary to pass the catheter, and he then found the vagina impervious; and on enquiry, he was informed, that "she had had a child, after a very tedious labor, about a year before; was very sore, but got well without mentioning this circumstance to the gentleman who attended her." Mr. Cooper has at various times since mentioned the subject to her mother, who always said, "her daughter was just as *she* was." And so convinced was he of the *impossibility of an impregnation,* that when she spoke to him to attend her, he supposed (without much enquiry or examination) that it would in the end prove to be a case of collected catamenia in the vagina, which might hereafter require surgical assistance; judge then his surprise, when, on being called to this patient, he found her *really in labor.* As he was now informed she had menstruated regularly before this impregnation, he very judiciously supposed that although he could not by an examination find the vaginal aperture, yet from this circumstance there must be one, and that in the natural progress of the labor it might dilate; he therefore waited, finding the strength of the woman kept up, from Tuesday till Friday, when the head pressing down so forcibly and so low, he requested a consultation with Mr. Tice of Ware, and myself.

Finding the circumstances as above described, we were all of opinion, that the parts must in the first instance be minutely examined; that if we could find any opening, (as the woman was said to have menstruated "*the right way*") it should be enlarged; and if we could discover none, that an artificial one should be made, and that then we should wait a reasonable time, to see what effect would be produced by the efforts of Nature.

On inspecting the parts, we found a projection immediately under the meatus urinarius, about the size of half a walnut, and which seemed *a pushing out* of a portion of the vagina,

vagina, and directly below this, a slight thin duplicature of the integuments formed by stretching the labia pudendi. Between this ridge and the protrusion above-mentioned, it was natural to expect to find the entrance of the vagina, and as strong a pressure as prudence would allow, was made here for that purpose, but without effect; not the smallest opening could be observed, nor in the *then state* of the parts, could we discern any cicatrix or appearance of adhesion. The perinæum was perfect.

Not being able to find any opening at this part, or by the most accurate examination any communication between the rectum and vagina, we proceeded, according to the opinion we had previously formed, to make an artificial opening. After the contents of the bladder were discharged, a small concave-pointed bistoury was passed on the finger, *within and behind the projection,* through the vagina; and as soon as it was made large enough for the top of the finger, the hairy scalp of the child's head was immediately perceived. The opening was now carefully dilated upwards and downwards, so as to make the orifice about an inch or a little more in length, taking care not to wound the rectum below or the meatus urinarius above. Having now clearly ascertained that it was a natural presentation, that the rectum and meatus urinarius were uninjured, the woman was put to bed and an opiate administered; this was about noon: she was now left to the care of Mr. Cooper, as both myself and Mr. Tice were under the necessity of being absent for some time. I was however, happy in receiving a note from Mr. Cooper the next morning, stating, "that the pains continued very strong till seven o'clock in the evening, before he could perceive any ground gained, when having been out of the room some time, on his return he thought he found a very perceptible difference, and the pains still increasing and the head continuing to advance, about nine she was delivered."

The child was of a full size and still-born.

I visited her by appointment on Sunday, the second day after delivery; we found her without pain or any great tenderness on the abdomen, the skin cool and perspirable, and she had passed her water copiously and without much inconvenience. The pulse was however low and quick; she had two or three rigors, and the tongue had rather a foul appearance. As she had had no motion, the body was directed to be opened by a gentle laxative, and attention paid to prevent adhesion of the divided parts, by a cautious introduction of a piece of candle, or a portion of

sheep's gut filled with warm water; it was recommended that for the present she should take a saline mixture with decoction of bark and tinct. opii, and such a portion of wine as might appear to be necessary, and hot flannels sprinkled with brandy were ordered to be occasionally applied over the abdomen.

On Saturday (the ninth day) I was much concerned to hear from my friend Mr. Cooper, "that our patient appeared going on well till Wednesday, when he found her pulse too low and much accelerated, her countenance rather sunk, the lochial discharge, though not copious, yet of a striking fœtor; she made but little complaint, and the belly was not more tender than in common cases. The next day every symptom was aggravated; and notwithstanding all measures were taken to counteract debility, she died on Friday, (the eighth day after delivery)."

As it was impossible to overcome the prejudices of the husband and mother, so as to obtain leave to open the body, we are left to draw our inferences from what is related above; and the first thing observable is, that as the woman had a child *nine years* before, there could *not at that time* be any unnatural obstruction; her time, though stated to be *laborious* and *tedious*, was not more so than commonly happens with first children; she was attended by a woman, and a medical gentleman was called in, but she was delivered before his arrival.

The account that she *was sore afterwards*, makes it reasonable to suppose that ulceration took place after parturition, and that the surfaces of the vagina united by cicatrization, which was the occasion of the present difficulty; and this opinion seems confirmed by Mr. C's account of her when he attended her for a suppression of urine, as, when he passed the catheter, he observed this defect.

Two questions naturally occur here. 1. How did she menstruate, *which it is stated she did*,* and how did the liquor

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* The writer is aware how frequently practitioners are deceived, by the description of patients themselves, or their friends, in matters out of the common way; but in the absence of positive facts, these relations are admissible, and particularly if, as in the present case, no practical inference is deduced from them. As a physiological case, the above is certainly defective, as the parts could not be inspected post mortem, but as a practical case it affords some information; and it is principally related with this view. Neither is it certain, that if we could have made the examination after death, that the information we wished for, could have been obtained, as the parts must necessarily have suffered considerable alteration during the progress of labour.

liquor amnii escape as it appeared to have done? 2. How was she impregnated? To the first question I have no satisfactory answer to give, the imperforation of the vagina, as far as we could ascertain by the most accurate examination was complete; neither could we discover by the touch any communication between the rectum and vagina, and the meatus urinarius had a natural appearance. On account of our not being able to obtain leave to inspect the parts after death, we are necessarily left in much uncertainty with respect to this point; and if in respect to this, in how much greater degree must we be in the dark as to the *manner* in which *impregnation took place*? But as I am not willing to wander into the regions of *conjecture*, or to build a fanciful hypothesis on so uncertain a foundation, I shall leave the case in your hands in its present state, vouching only for the accuracy of the facts I have related.

Bishops Stortford, Herts,
May 11, 1805.

I am, &c.
W. O. CRIBB.

A CASE *of* SMALL-POX *after* VACCINATION; *communicated by* MR. BLAIR, *Surgeon of the Lock Hospital, &c.*

ON May 7, 1803, I inoculated a child, named Alice Gorthorpe, with the vaccine fluid. The disease made its usual progress, and left a cicatrix on each arm, as may be seen at present. On the eighth day after inoculation, I took matter from this child, and vaccinated several others.

On Monday, June 3, 1805, the mother of the child, residing at No. 25, Tower Street, Seven Dials, came to my house, and shewed me the patient covered with a distinct variolous eruption, small in size, but fairly maturated. I sent her immediately to Dr. Adams, (who succeeded Dr. Woodville at the Inoculation Hospital) to prevent my giving an erroneous opinion respecting her case; he agreed with me that it was certainly the small-pox; and that this instance must be added to the few others which have occurred, of the variolous infection taking place subsequent to complete vaccination.

I have only to add, that three years ago I vaccinated another child of the same parent, and a third on the 21st of May last; both of which, with nine more who had been inoculated in the same family, escaped the small-pox

 on

on this occasion; and, what is deserving of notice, the infant whom I vaccinated on the 21st of last month (Thomas Gorthorpe) had slept in the same bed with his sister during the whole progress of her recent disease.

Great Russel Street, Bloomsbury, June 6, 1805.

To Dr. WILLAN.

Sir,

HAVING been extensively engaged in inoculating for the cow pock, I feel deeply interested for its success, and of course anxious to remove every ill-grounded report to its disadvantage The cow-pock inoculation has been favourably received in this town and neighbourhood, and continues to be very generally practised. Objections have occasionally been made to it by the ignorant and timid, which, however, have had no permanent effect upon the public mind.

About four months ago, whilst a bad kind of small pox was raging in the town, I was informed that a child, which had been vaccinated some months before, was affected with small pox: I therefore thought it my duty to enquire into the circumstances. Upon going to the house, I found a child, about seven years of age, labouring under the confluent small pox, and was informed, by the parents, that the youngest child, two years of age, had been inoculated twelve months before, for the cow pox, and, according to their account, the vesicle had passed through the regular stages. From this child matter was taken, on the seventh day, to inoculate the elder one, now ill, and, from the appearances which took place, the surgeon pronounced her to be secure from the small pox. About a fortnight before my visit, however, th s child happening to go into a house where a person lay ill of the confluent small pox, immediately became sick, and returned to her mother, much alarmed, and complaining of the bad smell. Two days afterwards the small pox appeared, and were extremely severe. This case was certainly a very glaring instance of failure, and accordingly made much noise; but, upon inquiry, the business was soon unravelled. The punctured parts had inflamed considerably in the second child, immediately after inoculation, and had nearly subsided on the ninth day, when those of the child first inoculated only began

began to inflame. Upon examination, a cicatrix was very visible on the arm of the younger child; but not a vestige was observable on that of the older one. During the whole progress of the disease, the younger child slept with its sister, and underwent the ordeal with impunity. It is therefore evident, from this account of the parents, that the older child had not received the infection of the vaccine pock.

Whilst this case was still talked of, two other children, that had been vaccinated some months before, were said to be affected with small pox, which induced me to visit them also. I found they had both experienced a slight indisposition, previous to the eruption of a number of pustules which contained a puriform fluid; but at my visit, on the sixth day of the eruption, the pustules had disappeared; not even a scab was visible, and the skin appeared only slightly discoloured with blotches. The arms of the children were visibly marked by the inoculation, which, by the account I received, had proceeded regularly. Several such instances of varicella have occurred in my own practice, without occasioning any uneasiness to the parents, because I had forewarned them of such an occurrence.

Since the above was written, four cases of small pox, after supposed vaccination, have occurred to Mr. G. a surgeon in this town. When informed of these unfortunate cases, I visited the patients, to be convinced of the truth of the report, and applied to the gentleman himself; but he had forgotten the circumstances respecting them, further than that he supposed they had passed regularly through the inoculation, as his other patients had done, and particularly his own child, which he had afterwards submitted to the test of variolous inoculation without effect. The following statement, with which he favoured me, is all the information I could procure concerning them:

"John Gait, son of John Gait, inoculated the 5th December, 1804; inflamed regularly, and pustules full, the 14th; left an indelible mark; took the natural pox the 3d March, 1805, confluent and bad kind; died the 14th.

"Robert Thompson, son of Thomas Thompson, inoculated the 5th March, 1804; inflammation and other symptoms regular; took the natural pox the 10th March, 1805, distinct and mild.

"Richard Hall, son of Richard Hall, inoculated the 17th December, 1804; symptoms regular; had four or five pustules on other parts, caused by scratching; took the natural pox the 24th February, 1805, full, but not confluent.

 "—— Elder

"—— Elder was inoculated on the 20th December, 1804, and took the natural small pox in April; confluent and bad kind."

I call these cases unfortunate, because they did much mischief at the time: they created suspicion; and unsettled the mind of the public, though they did not, in the least, militate against the cow pock, as it had assuredly not been produced; they were instances of what has very injudiciously been called spurious cow pock; I have hinted this to Mr. G. and recommended him to reinoculate all the patients who were vaccinated at that time, as I am convinced they are in a precarious state. I have examined the arms of all the abovementioned children, except of that which died, and could not perceive the smallest appearance of depression or pit in the inoculated parts; but I must acknowledge that, in this respect, there is a great difference in my own patients: for in some the depression is considerable; while, in others, there is only a circular patch, of a deader white than the surrounding skin.

It appears astonishing that, at this advanced period of the practice, any mistake can occur, respecting the appearance of the vaccine pustule, when it has not been broken by scratching. Until the fourth or fifth day, sometimes a little later, it resembles a small pox pustule, has a small indentation in the centre, and a slight tinge of a roseate hue, which, as the vesicle approaches the size of a common pea, gradually changes into a dirty white, whilst the indentation becomes more deep. The circumference of the vesicle is bounded by a faint red circle, in some instances scarcely perceptible, which, about the 9th day, becomes diffused, and of a fiery red, having frequently a deep tinge or flush of red, shooting in a radiated manner from the centre to the circumference; but those who have noticed the seed of the common mallow, will instantly recognize the orbicular form, convex, and somewhat striated edges, and depressed centre of the cow pock vesicle. This criterion was, I believe, first noticed by the American Jenner, professor Waterhouse, in his instructive account of his labours in introducing the *kine pock* into America, with a perusal of which I was favoured by my friend, Dr. Willan.

During the last winter, the small pox and measles were epidemic in this town, and frequently appeared together in the same patient. The small pox was of a very malignant kind, and carried off a number of children. In consequence of this mortality, the applications for vaccine inoculation were numerous, and some of the children were of

of course inoculated whilst under the influence of variolous contagion, or were exposed to it before the vaccine virus had affected the system; but in all these instances the cow pock vesicle proceeded regularly, except in appearing to be larger than usual, and having no areola. One child, inoculated with fluid vaccine matter, sickened four days afterwards, and, on the fifth, the confluent small pox appeared, which proved fatal on the fourteenth day. Matter taken from a vaccine pock of the ninth day, on this child's arm, perfectly formed and turgid, but without areola, was inserted into the arms of three children, who passed through the vaccination in the most regular manner. Another child, about five years of age, living in a house where a young man was brought, having a numerous eruption of discrete small pox, was immediately removed, and inoculated with vaccine fluid. The vesicles formed and proceeded as usual; on the eighth day after inoculation she sickened, and on the ninth day upwards of two hundred pustules appeared, which on the eighth day of eruption contained a purulent matter, and became rough at the apices. It seemed here as if the variolous eruption had received some check or modification from the inoculation, as the pustules did not exceed the size of a large pin's head, and had not an inflamed base.

The measles, though equally prevalent, were, in general, mild, and appeared in several children during the progress of inoculation, without producing any other effect than of preventing or retarding the appearance of the areola. From a child on the eighth day of vaccine inoculation, and the fourth of the eruption of measles, three children, who had not been affected with the latter disease, were inoculated, and passed through the vaccine without being affected with morbilous contagion.

A lady, between the fourth and fifth month of pregnancy, was seized with a violent febrile attack, followed by a copious eruption of measles, from which she recovered without inconvenience; but from that time the motion of the child ceased. About three months afterwards she miscarried; the child appeared to have been a long time dead: the cuticle had somewhat of a speckled appearance, but not so distinct as to enable me to determine that the child had been affected with measles.

I have never met with any eruptions succeeding vaccine inoculation; nor have I ever observed any troublesome sores, or other inconveniencies, arising from the punctured parts. I have already given my testimony in favour of vaccine inoculation, (Physical Journal, vol. 6 and 7) which

succeeding

succeeding experience has confirmed; but I must observe, that the mode of explaining some of the supposed failures of the cow pock, which have been lately published, by attributing them to local pustules having been formed, unaccompanied with constitutional affection, have rather surprized me. This doubt occurred to me before; and I must now declare, that if an *evident* affection of the system be essentially necessary, many of my patients are insecure; for, among several hundred patients, whom I have inoculated since the year 1801, a very large proportion suffered no *apparent* constitutional affection from the communicated disease, if indeed, from its mildness, it may be called a disease.

I am aware that an ingenious method has been proposed to determine this doubt, by repeated inoculations during the progress of the vaccine vesicle; but I am certain the patients whom I have to deal with would not submit to the plan; nor could any medical man find time to practise it, where his patients are widely spread. I am still, however, inclined to doubt of the necessity of strongly-marked constitutional affection, because, ever since I mentioned my notions respecting the supposed want of susceptibility of variolous contagion, in so large a proportion of subjects as is commonly imagined, I have inoculated a great number of adults with vaccine matter, who were positive they never had been affected with small pox, and yet I have not succeeded in exciting a local pustule. The result has been the same in every instance; the punctures inflamed for the first four or five days, became covered with a conical scab, and then disappeared.

It may appear too trifling to notice, but I am persuaded that much of our success, in inoculation, depends upon the mode of introducing the virus; and if punctures were used, instead of slight incisions or scratches, there would be fewer failures in communicating the cow-pock infection. By making two punctures in each arm, and using fluid matter where it can be obtained, I have succeeded in vaccinating patients who had been inoculated but a few weeks before, and were supposed to be unsusceptible of the infection.

Vaccination has no where been received with more eagerness, or practised with more zeal, than in Germany: besides their numerous journals, which teem with facts respecting this important practice, there is one, entitled "Schlesisch-Südpreussisches Archiv der, die Ausrottungspocken betreffenden Erfahuengen und Verhandlungen für Aerzte

Aerzte und Nichtarzte von Friese & Nowack, which is dedicated solely to the purpose of collecting whatever is important in this practice, from foreign as well as domestic sources. The following paper, by Dr. Udleray of Eutin (inserted in the Nordisches Archiv für Natur-und Arzney-wissenschaft. Herausg von Prof. Pfaff & Dr Scheel. See Kausch's excellent Journal, entitled Geist und Kritik der Medic. & Chirurg. Zectschriften Deutschlands) contains some interesting particulars respecting the "blue cow pock," (which, it seems, is popularly known in Germany, as well as in England) that may perhaps prove not unacceptable to your readers. Dr. H. was first informed by a farrier, that in Holstein whole herds of cows are frequently affected with this disorder, although the men who attend the horses are never employed in milking the cows. They are well acquainted with the clear blue pock described by Dr. Jenner, and distinguish it from the following kinds, which they consider as spurious.

1st. The black pock, which is broader than a "*Holstein schilling*," depressed in the middle, and filled with a thick pus. The servant girls, when infected, experience slight rigors, succeeded by increased heat, depression of strength, head-ach, and pain in the axillæ; the pustule degenerates into a painful spreading ulcer, difficult to heal.

2nd. The yellowish brown pock, not so broad as the former, but turgid, with a clear yellow fœtid ichor, and looks like an amber vesicle. The cows are more disordered by this than the black kind; the milk is diminished in quantity, and spoiled by milking, which occasions an almost insupportable smell. A healthy person, infected with this kind of pock, nearly lost a joint of his fore finger from the ulcer. These two kinds of cow pock were observed by Dr. Nisser of Seeberg, and are not mentioned by Dr. Jenner.

3d. The white cow pock, consisting of a large white vesicle, and producing inflammation and tumour upon the hands and arms, but no affection of the system; they are easily cured by domestic remedies. This kind is noticed by Jenner; and the following, the *wind pocken*, which produce ulceration on the teats of the cow, and the hands and arms of the milkers, are noticed by Pearson.

In a young woman, seventeen years of age, Dr. Hollway found a small vesicular eruption on the hands and fore-arms, attended with considerable heat and tumour; she had likewise, on both sides of her hands, a number of large flat blackish vesicles. The colour seemed to arise from the dark

dark red basis of the vesicles shining through the semi-transparent cuticle. She had milked cows that had the black pocks upon their udders, and, a fortnight before Dr. H's visit, had a slight febrile attack, but felt no subsequent illness. She had passed through the small pox in 1791: hence he concludes this was not the genuine cow pock, as it excited both local and constitutional illness, because it is contrary to what happens when the cow pock is excited after the small pox.

Dr. Hollway found, on further inquiry, that the protective power of the cow pock against small pox is well known in Holstein; and he relates several instances of adults who had experienced the cow pock during infancy, and who could not afterwards receive the small pox, either by inoculation or exposure to contagion. A woman assured him that, twenty-eight years before, in order to escape the small pox, she had endeavoured to get the cow pock by milking infected cows; but not succeeding, she made a slight scratch, and rubbed it with cow-pock matter; in consequence of which she sickened. Several years afterwards she was inoculated with small-pox matter, and also exposed to contagion, without effect. Two women also had the cow pock forty-five years before, and had ever since resisted the small pox; and another woman had, for thirty-five years, been protected in like manner. Dr. H. also mentions a farmer who had inoculated five of his children thirteen years before, with cow-pock matter; a practice which, it appears, had long prevailed in his family. In July of the same year (1802) Dr. H. visited a healthy girl, about eighteen, who had been affected with the cow pock, three weeks before; she had been sick about eight days, and had sometimes been confined to bed. She was now well; but had, upon her hands, some dry scabs of the cow pock. The pustules upon the teats of the cow were of a clear blue colour, before they burst. The crusts were removed from the girl's hands; and the thin fluid, upon the exposed parts, was absorbed on lint; and with this three children were inoculated next day, by means of small blisters. (This mode of inoculation, which was very generally practised on the continent, for communicating the small pox, cannot be too strongly reprobated in the present disease, as it destroys the characteristic appearance of the vesicle, upon which alone we can form our opinion of the patient's security). On the second day the inoculated parts discharged a little; a thin yellowish matter was observable on the fourth, which increased on the following days.

The

The night of the eighth was restless; and on the ninth a general indisposition took place, which continued until the twelfth. On the fifteenth all disorder had ceased; the inoculated spots formed considerable ulcers, which healed by the application of digestive ointment. Dr. H. observes that the inoculation succeeded with the crust or scab of the cow pock, as well as with that of the small pox. One of his patients, some weeks after inoculation, having scratched the inoculated part violently, was affected with tumour, and hardness of the upper part of the arm, which gradually spread over the fore-arm, but yielded at length to the application of lime water, and the internal use of the decoct. calc. antim. sulph. of Hoffman. A cow, which had ceased to give milk, was inoculated in the teat with vaccine virus. On the third day a redness appeared, which gradually increased; the teat was swelled on the eighth; on the eleventh the cow was hotter than usual, and the pulse beat sixty times in a minute. A hard ring, about five lines in diameter, appeared, in the midst of which a brown scab was observable on the thirteenth; the eyes were watery, and the pulse sixty-four. On the fourteenth the udder was hard; the ring of the vesicle was soft, more elevated, and had a blue tinge. On the fifteenth the scab appeared rather moist, and the next day it fell off.

South Shields, May 24, 1805. T. M. WINTERBOTTOM.

Case of FRACTURE *cured by the Use of Nitric Acid, by Dr.* PENEL *of Abbeville.*

AN elderly man, whose left thigh had been fractured obliquely, at its inferior part, was received into the Civil and Military Hospital at Abbeville. The reduction of the fractured bone was easily obtained, and the symptoms soon disappeared. On the fourteenth day, when the dressings were removed, the parts appeared in a good state; the following morning, however, the patient complained very much of his thigh, although the fracture seemed not to be deranged. On the nineteenth day the bone was slightly swollen; the callus appeared to get more consistency; but the fever continued. On the twenty-seventh day, Dr. Penel, having removed the dressing, perceived more evidently the swelling of the bone; and the callus exhibiting some inequalities, caused him to suspect the presence of a morbid poison. About this time, the Peruvian bark and anti-

scorbutic

scorbutic remedies were employed, but without the intended success. On the fortieth day the bone appeared still more tumid; the callus presented a considerable tumour, which appeared solid. The dressings were now entirely removed, and the limb laid on a bolster; after which the patient found himself better; but, on a sudden, the muscles contracted, the callus was destroyed, and the whole member shortened; and it was necessary to make a forced and lasting extension, in order to reduce it to its former length. Dr. Penel observing that the urine deposited a considersble quantity of a greenish substance, found it, on examination, to be phosphat of lime. The swelling of the limb disappeared a few days after, and the fracture seemed again to consolidate; the urine, however, remained the same, and was passed in a greater quantity; the febrile motions continued, but the swelling of the bone was not augmented. Two months after the fracture, the callus appeared again solid, and Dr. Penel continued the dressings twenty days longer; but they were scarcely removed, when the patient found himself unable to stand, and perceived the same symptoms as at first. On visiting him, two days after, the extremities of the fracture separated, and the author was obliged to undertake the reduction a third time. He now determined to give the patient, internally, nitric acid, which he accordingly took, in a dose of one demi gramme per day (about ʒß) diluted in a kilogramme of water, (about ℔ii). The urine became clearer, the fever ceased, and, eight days afterwards, the patient found himself so well, that he desired the dressings might be removed; this request, however, was not complied with, till the fourth month after his first reception, when he left the hospital, as he could walk with great ease, and without crutches.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN your Journal of last April is contained a letter, dated Chatham, and subscribed Thomas Hope, the object of which is to recommend the internal use of arsenic for the cure (or, perhaps, for only the prevention) of rabies canina. As I am one of those, who deem arsenic, under any administration, in the present state of medical science, a most

a most formidable remedy; and as I am seriously alarmed, lest the letter in question should tend, among such as have not duly attended to the appropriate studies of their profession, to raise an unmerited reputation for one of the most deadly and unmanageable of poisons; it is my earnest request that you will insert the following remarks in your next Journal.

1. Mr. Hope asserts, that Dr. Bardsley's communication "can but excite the rising wish that some remedy may be discovered that will remove so dreadful a disorder as that of rabies canina." It seems, therefore, as if he takes it for granted that the wish to cure canine madness is as yet but a rising, or, as I understand it, a nascent wish; whereas, Gentlemen, this very wish, as you know well, had actually risen, and had become universal, even before the reign of Claudius, (Celsus, de Med. Lib. iv. Cap. 27.) Besides, the phrase, "to excite a rising wish," is so very uncommon, that I must dwell a little upon it. When we hear or read of a tumult having been excited, it suggests to us, that no tumult had pre-existed, or that there had been no rising tumult. Perhaps for "excite" we should read *incite*.

On so important an occasion as the present, (Rerum volo esse solicitudinem,) I would willingly forbear to criticise the grammar, or logic, or rhetoric of any gentleman; and, for this profession, I expect that even Mr. Hope will give me credit, when he shall again have examined the rhetorical exornation, with which his letter begins.

2. But to proceed. Dr. Bardsley having witnessed some cases of hydrophobia, that ended fatally (as, I believe, every case of it has ended,) led by experience of the efficacy of tonics, says, "if it should ever fall to my lot to treat a third case of so distressing and fatal a malady, I shall be tempted to try safe yet active doses of the arsenical solution, &c." and Mr. Hope says emphatically, "I have, to encourage the practice, (i.e. I presume, the practice which Dr. Bardsley intends to adopt) sent you the following recipe; which I have for some time had in my possession. The following is a literal transcripton, and is entitled,

"*A Receipt for the Bite of a mad Dog.*

"Take the leaves of rue, pick them from the stalk, bruise them; six ounces of garlic, picked from the stalk, and bruise them likewise; Venice treacle or mithridate and the scrapings of pewter, of each four ounces. Boil all the above ingredients over a slow fire, in two quarts of strong ale,

ale, till one pint be consumed; then keep it in a bottle close stopped up, and give thereof to a man or woman, (warm it first) nine spoons full, seven mornings fasting together. To a dog six spoons full.

"This the author believes, will not, by God's blessing, fail, if it be given within nine days after the biting of a dog. Apply some of the ingredients from which the liquor was strained to the bitten place.

"This recipe was taken out of Colthorpe Church, in Lincolnshire, in 1766, the whole town being bitten by a mad dog; all that took this medicine did well, the rest that did not take it, died."—Here, Gentlemen, I must digress so far as to declare my regret, that Mr. Hope does not inform you how he came by this recipe. For to me nothing seems clearer, than that it is a mutilated and corrupt copy of Sir Theodore Mayerne's receipt, published many years ago in the Philosophical Transactions; where it stands thus: "Take leaves of rue picked from the stalks, and bruised, six ounces; of London treacle, (or, which is better, Venice treacle) garlic peeled and bruised, and fine filings of tin, each four ounces; put them into two quarts of Canary or good white wine; or in case of a nice constitution, into the same quantity of strong and well-worked ale, in an earthen vessel well stopped. Then let there be made a digestion or gentle boiling thereof, in a bath heat, for some hours, shutting in the steam. Then press it and strain it.

"The dose is from two to three ounces or more, to be taken every morning for nine days."

3. To return from my digression. In what manner is the practice of encountering hydrophobia with arsenic "encouraged," by hydrophobia having been prevented by the exhibition of *arsenic* (granting that it have been so prevented)? The means of cure, in this instance, are not at all likely to be the means of prevention likewise; for mercury, every one knows, cures syphilis, but does not prevent it; Peruvian bark cures intermittents, but does not prevent the disposition to them, when once formed, from running into action, &c. How, then, does Mr. Hope encourage that practice, which Dr. Bardsley intends to adopt?

a. Another question, suggested by Mr. Hope's communication, "the whole town of Colthorpe being bitten by a mad dog," (doubtless an hyperbolical auxesis,) is, What proof is there that those who took the pewter medicine would have had a timor aquæ, if they had not taken it?

it? It is a fact generally admitted, that out of twenty bitten by a dog really mad, nineteen, upon an average, escape without hydrophobia.

Mr. Hope's "literal transcription" may by some fastidious readers be thought to evince, that not the dog, but the people of Colthorpe were mad; but I will only suppose, for the present, that the dog was wonderously empowered to bite, and the people miraculously disposed to be bitten.

b. And another question is, If the Colthorpe remedy have ever prevented hydrophobia, (of which, however, there is not the shadow of a proof) is the use of arsenic, in any degree, authorised by it? Mr. Hope thinks it is; he says, "the chief ingredient is most probably the pewter, and that from the arsenic which enters its composition." But arsenic cannot be said to enter into the composition of pewter, because tin, which is a necessary component part of pewter, may, accidentally, be contaminated with arsenic. "Now and then," says Gren, "tin is contaminated with arsenic, but all sorts of tin are not contaminated with that metal." Mr. Hope's opinion, therefore, contains a petitio principii.

Again, although the fumes of pewter impregnated with arsenic are noxious, yet pewter is not noxious; neither is tin noxious in its metallic state; for Alston and others used to prescribe tin in very large doses, even the dose of an ounce, as an anthelmintic.

Lastly, supposing the tin to contain $\frac{1}{1152}$ part of arsenic; (and Gmelin assures us the commonest sorts of tin do not contain more) and supposing pewter and tin to be soluble (which they are not) in water, in ale, in Canary, in saliva, or in gastric liquor; even then Lewis, Gren, and Gmelin agree in maintaining, that nothing detrimental is ever to be apprehended from the contamination.

4. But that, Gentlemen, which chiefly induces me to send these remarks to be inserted in your Journal, is a belief, that Mr. Hope's letter seems calculated to divert entirely the attention of those, whom it may influence, from the only certain preventive of hydrophobia. For to this certain preventive, *v. g.* the timely excision of the bitten part, or to the destruction of that part, in any other way, Mr. Hope's letter does not contain the most faint allusion.

That the importance of this measure may be fully and fairly estimated, your readers must recollect, that it is a law of all those morbid poisons, which act only in a palpable form (e. g. vaccine virus) to excite inflammation at the

the place of insertion, before the specific disease shows itself in the constitution; and, that a caustic applied to the vaccine pustule, on the seventh day, effectually prevents vaccina; so that whatever may be the interval between the bite of a mad dog and the appearance of hydrophobia, which is constantly fatal, (Dr. Hamilton thinks it happens oftenest between the fourth week and the third month,) the destruction of the bitten part, provided it can be done safely, by excision or by the actual or potential cautery, or the amputation of a limb, provided it be necessary, ought never to be deferred a single moment. Mr. Nourse relates a case, in which the constitutional symptoms did not appear till the nineteenth month; but there is a case on record, in which the excision of the bitten part, performed four days after the bite, did not prevent hydrophobia. I repeat, then, that hydrophobia, like vaccina, is an inoculated disease; that both affect the constitution through the medium of an external and specific inflammation; and that both may be prevented, by preventing this external and specific inflammation. Whether, therefore, Mr. Hope deserve more blame for what he has done, than for what he has neglected to do, let your candid and intelligent Readers determine.

Assuring you, Gentlemen, that I have nothing more at heart than the improvement of medicine, and a desire to see it applied justly and rightly,

Rochester, I subscribe myself, &c.
June 9, 1805. WALTER VAUGHAN.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IF the annexed case should be deemed worthy of being inserted in your useful Journal, it is hoped it will be a means of proving the superior efficacy of Mr. Kentish's practice in burns. Your's respectfully,

Tavistock, June 5, 1805. JOHN HORNBROOK.

SAMUEL RUNDLE, aged forty-two, labourer at a brewery in Tavistock, passing over the mash tub on a plank, slipt his foot, and fell into the boiling mash up to his knees. When

When I saw him, his situation was truly lamentable; in taking off his stockings, the cuticle, which had been totally detached by the boiling water, was lacerated and torn in ribands; he was held by two of his fellow labourers, in order to prevent his dancing about the room, in consequence of the excruciating pain; the whole of his legs were immediately washed with ol. tereb. and afterwards dressed with a liniment made of ung. basil. flav. and ol. tereb.; a glass of strong brandy and water with opii pur. gr. ij. were immediately given, and a mixture with tinct. opii camph. to be taken every two hours, with orders that he might take any thing comfortable either to eat or drink.

Second day, The pain gradually abated after he was dressed, for about three hours, when it remained stationary and returned in paroxysms, which became less painful and of shorter duration the one than the other. The parts were washed with ol. tereb. and the former dressings applied; the mixture continued and the pil ex opio at night; the generous diet to be persevered in as at first ordered.

Third day, Has passed a tolerable easy night; pulse 100; some appearance of secretion where the vesications were. Cease to apply the ol. tereb. and liniment to these parts, and use the cerat. é. lapid. calaminar. The diet was gradually diminished in respect to its stimulant qualities; the proportion of the fermented liquors less; calomel, gr. vj. opii, gr. j. cons. ros. q. s. f. bol. h. s. s. as he is rather costive.

Fourth, fifth, and sixth days, he continued to do well; pus secreted where there were vesications, and the process of skinning is going on rapidly on both legs. Continue the cerate, and the diet to be now moderate.

Eighth day, He walked to the brewery and back again without my knowledge or consent.

From the eighth to the seventeenth day, nothing particular took place to retard the progress of the cure, which, in respect to the scald, might be said to be compleat, as the legs were now covered with new skin; to guard which from cracking, I ordered the liniment with ol. lini. and aq. calcis to be applied with a feather.

The liniment with ol. lini. and aq. calcis answer very well in this stage of the complaint, as an application to harden the new skin and to prevent its cracking, as new cicatrices are liable to.

Nineteenth day and regularly since, he has followed his usual employ in the brewery.

 A similar

A similar accident happened to one of the partners in the same brewery, about three years since; the treatment having been totally different, he was three months before he left his room. I am induced, in justice to Mr. Kentish's Essay on Burns, to publish this case, to prove the advantages derived from his treatment as being far superior to any I ever knew employed.

On Scrofula; Naval Surgeons; and Mercurial Inunction in Fevers.

To the Editors of the Medical and Physical Journal.

Gentlemen,

MUCH may be done by a little ingenuity in the treatment of this loathsome disease, and particularly in that part of it which relates to the prevention of that deformity, which is generally the result of mal-treament; either in opening these tumours at too advanced a period, or foolishly suffering them to discharge their contents spontaneously. I am fully persuaded that the beauty of many a handsome face, might be most effectually preserved, and those shocking scars, so disgusting to the eye, most perfectly obviated. In delivering my sentiments thus freely to the public, on a subject of the first importance, (for it is evident that the comfort and happiness of thousands have been sacrificed by the embittering reflection which invariably must originate from conscious deformity, accruing from this insidious disease) it is necessary for me to substantiate the validity of my sentiments, by bringing forward a case or cases exactly in point, which have the firm basis of truth and practice for their support, aided by a theory, as true as the correct solution of any mathematical problem.

A young man, ætatis 20, who had long laboured under scrofula, and who had been under the care of a medical practitioner for some time, made application to me during my residence in Romsey. The parotid and sub-maxillary glands of the left side had suppurated, and left behind a disagreeable cicatrix; the right side was affected in a similar manner, as far as related to the disease, but the integuments preserved their natural colour, for the suppuration

tion had not advanced far enough to injure the texture of the cutis vera. In order to prevent this side of the face from being disfigured, I plunged the point of a spear-pointed lancet into the inferior and most depending part of the superior tumour, and discharged its contents by making pressure; the opening was preserved by introducing a small piece of lint, which was removed twice a day. At such dressing, the finger was drawn over the tumor; the matter evacuated, and a piece of adhesive plaster was applied over the lint. One of the sub-maxillary glands was treated in the same manner; and when they were healed, the contrast between the cicatrices on the right and left side was very striking, and of course can only be attributed to a different mode of treatment. When these swellings are suffered to extend the skin to a certain degree, after suppuration has taken place, the ulceration beneath not only becomes more extensive, and consequently more difficult to heal, but retards the cure, produces discolouration of the integuments, and distends them so much, that if not completely destroyed, they are generally puckered in such a manner as to occasion a most unseemly, botched, and what may be termed an unscientific cicatrix. Whereas, by managing these tumors in the way I have described, the parts retain their natural colour, and no mark is left behind, save that of the lancet, which will in a short time become effaced. With respect to the external applications, I conceive nothing can be more serviceable than lint or sticking plaster; all kinds of ointments ought certainly, most religiously to be avoided, as they invariably aggravate this disease, which is entirely of an asthenic diathesis, and therefore requires tonic treatment. Pressure greatly promotes the cure, and will in general succeed, with the assistance of sticking plaster or lint. When there is difficulty in making pressure, astringent, cold, aqueous applications have an excellent effect.

I some time ago was desired to visit a female, whose legs had been for many years covered with scrofulous ulcers, which had gradually got worse and worse; they were considered incurable, and she had been discharged from an infirmary without receiving any benefit. The dressings she used consisted of a variety of greasy preparations, which only served to keep up and increase that atony and irritability which had so long existed. In the course of a few weeks, by firm bandaging with calico wrappers, affusions of cold water, suitable compresses, adhesive strips of plaster

plaster and lint, her sores healed up, and she was restored to the use of her legs, which she had for years been deprived of. As for the medical treatment, every one must know, that strong, animal, and gelatinous food is chiefly to be depended on; medicine, when the digestive powers are debilitated, will have a good effect; but it is a difficult thing to produce a speedy change in the solid and fluid parts which constitute the human frame; and which, in all probability is, ab origine, impressed with some properties so peculiar to itself, as in a great measure to enable it to resist, and counteract the intentions of the most skilful physician.

Having, in No. 63 of this Journal, made mention of Naval Surgeons, as a body of men who were not properly remunerated for their services; it is with joy, that I have to communicate the pleasing tidings of His Majesty having most graciously been pleased to take their case into consideration; and by an Order in Council, has caused several regulations to take place relative to their future establishment and emoluments, worthy the King of a great nation; redounding to the honor, and truly indicative of the wisdom of his counsellors; who have at length placed them on that footing, which every liberal and enlightened Naval Officer has long acknowledged to be most justly their due. I am, &c.

Yarmouth Roads, RALPH CUMING, M.D.
May 31, 1805. Surgeon of H. M. S. Malabar.

P.S. I wish to observe that I have, since joining this ship, experienced farther proofs of the efficacy of mercurial inunctions, in cutting short, and speedily curing typhus fevers; after giving wine, opium, volatile alkali, and other diffusible stimuli, the most patient and fairest trial.

One of my patients took umbrage at what he conceived a very novel treatment, and observed, with an air of great gravity, that he was not *poxed!* But the salutary effects of the remedy, soon convinced him, that it was possessed of more virtue than he was willing to give it credit for.

And those medical gentlemen, who are not contented with that degree of perfection which the medical art has already attained to, will do well to have recourse to a medicine which may truly be considered a sheet anchor, when used with discretion and judgment.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

USEFULNESS is the great leading motive in liberal practitioners, the accomplishment of which I conceive is exceedingly promoted by a frank disclosure of well-attested facts and cases.

Upon the subject of the Hooping Cough, medical exertions have of late been very laudably exercised, and with indisputably salutary effects; if what little I have to advance relative to the abatement or removal of that distressing malady, be approved, I shall deem the sacrifice of pecuniary remuneration more than compensated by the pleasing satisfaction afforded in having furnished medical men with what I conceive to be an acquisition for the welfare of the community, which indeed is a motive of no small magnitude to a benevolent and humane mind. It is admitted that, for the most part, medical men do not enjoy a reward equivalent either to the labor or expence incurred in their preparatory studies, or to the subsequent dangers attendant upon their professional avocations; nevertheless, I thus venture upon the candor of my medical friends, for whom I entertain an increasing esteem, and whom I consider as a society most essentially servicable in ameliorating the miseries of humanity.

The method I have been accustomed to adopt for more than ten years past, is this: ℞. Sulph. antim. præcipit. & spt. vini rectific partes æquales. When mixed in a copper vessel, set it on fire, stirring until the spirit is evaporated; and lest any moisture remain, I generally put it for a few minutes over a slow fire. This dried powder I give from one to five grains three or four times a day, as the age and strength of the patient, or the violence of the disease, requires. I have generally found that in two or three days it has abated the spasm and considerably promoted expectoration, and cured within a period of two weeks at the uttermost. I come far within the lines of veracity, when I assert that the successful cases, on the average, are thirty to one.

It may seem somewhat contradictory to the benevolence of the disclosure, that so great a length of time has been suffered to elapse while this method of treatment has been so little known. I readily grant the apparent reasonableness of the objection, and thus reply: Publicity by ad-

 vertisements,

vertisements, generally adopted by empirics, has ever been so incompatible with my views of liberal decorum, that I could never be persuaded to employ such a method, in any modified form whatever, together with that of my union with the Royal College of Surgeons in London, since February, 1794, that I have uniformly opposed all such kind and well-meant interferences of my friends and patients, and have hence adopted the present extensive and honourable method of subscribing myself, very respectfully, &c.

Bread Street Hill, June 8, 1805. ED. SUTLIFFE, Surgeon.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I MET, by accident, a few days since, with the 75th number of your Journal, and was, I confess, rather surprised at the contents of a paper, signed Chirurgicus, in which the author accuses Mr. Symmons of ignorance, in ascribing to Parè the first introduction of the ligature in amputations.

The first point, perhaps, that would strike a common reader is, the mention he makes of the incursions of Henry the Fourth into Italy; whereas that great monarch never, either before or after his accession to the crown of France, penetrated beyond some towns of Savoy, or ever sent an army into Italy; and, on further inquiry, we shall find, that even this expedition into Savoy did not take place till the year 1600*, ten years after the death of Parè, who died, at a very advanced age, in 1590†, the year after Henry came to the crown, after having been first surgeon to the four preceding kings. Not that I would mean, by this, to infer, that Parè had not, many years before this period, served in Italy as surgeon in the armies of Francis the First and his successor, and probably seen the ligature used to stop hæmorrhage in gun-shot or other wounds. That some of his countrymen also, through ignorance or partiality, have wished to attribute to him the entire invention of the idea

* Memoires de Sully, Perefixe, &c.

† Portal Histoire d'Anatomie et Chirurgie, tom. 1.

idea of the ligature, is certainly true; but others*, more enlightened, have not attempted to support a claim which Parè himself never insisted on. He modestly avows his having met with a passage in Galen, in which it is advised to tie up the vessels from which the blood is poured. After mentioning the cruelty and disadvantages attending the use of the cautery, he proceeds, "Itaque chirurgos omnes obnixè rogatos velim, ut vetere illâ, et crudelitatis crimine obsitâ medendi viâ relictâ, hanc novam amplectantur, quam me edoctum Dei numine arbitror; non enim illam a magistris, non a quoquam alio didici, aut usurpatam unquam animadverti. Tantum apud Galenum legi, ad sanguinis fluxum sistendum, nihil esse presentius, quam vasa ipsa, quorum ductibus fit fluxio, versus radices suas, hepar nempe, et cor religare. Hoc Galeni præceptum de vinciendis, et suendis venis, et arteriis in vulneribus recentibus, ad ea quæ membrorum amputatione fiunt cum traduci posse putarem, tentavi in plerisque.*" He proceeded, at first, with caution, keeping heated irons in readiness by his side; but finding his method completely succeed, and no bleeding ensue, he bade them an eternal farewell. Moreover, in his dispute, afterwards, with Gourmelen, he examined all that had been written on this subject, and was particularly anxious to produce authorities*, to show that the use of the ligature, in hæmorrhage, was sanctioned by the ancients, and was, by no means, a cruel or a novel practice, as his countryman attempted to prove.

But to the principal point, Parè asserts that no one had ever made use of this idea, or reduced it into practice in amputations; nor has that assertion ever been proved to be false. The justly-celebrated Van Swieten*, whom no one ever accused of partiality, gives the whole honour to Parè, and mentions the great Vesalius, who flourished at the time Parè was in Italy, as still practising the ancient method*. In examining the extent of the knowledge possessed by the ancients, on this subject, he quotes the very passage produced by Chirurgicus, from Celsus; so that, without recurring

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* Louis et Morand Memoires de l'Acad. de Chirurgie, 4to. tom. 2.

* Parai Opera Fol. Francofurti, 1594, page 373.

* He quotes Hippocrates, Celsus, Galen, Avicenna, Vigo, Guy de Chauliac, Vesalius, and many others.

* Van Swieten Comment. in Boerhaave Aphor. 4to. Lugd. Batav. tom. 1. page 348 et 823; see also Friend's History of Physic, vol. 1.

* Vesalius died in 1564. Portal, tom. 1, page 398.

2

ring to the father of surgery, this passage might have been met with in a book which is almost in every one's hands. Van Swieten proceeds to mention a supposed improvement on the method of Parè, introduced by Dionis; but the original practice was at last universally allowed to be the best, and has continued to be so, even to the present day; but so strong are established rules, that, many years after the death of Parè, the cautery was still employed by surgeons of the first eminence*.

By this sketch, I think I have shown that Chirurgicus was, by no means, master of the subject on which he professes to determine; and I will not tire you by producing any further evidence, to corroborate what is already so firmly established. It might perhaps be a useful employment, to examine more particularly into what has been written on this subject; and I am fully confident that, after the closest inquiry, when it is considered also that the circulation of the blood was at that time unknown, and that for a cruel operation, he substituted a safe and infinitely easier one, it will be freely allowed, that the honour given to Parè was not unjustly bestowed.

TIRO.

A singular Case of HYDROCEPHALUS, *by* JAMES S. STRINGHAM, *M. D. Professor of Chemistry in Columbia College, America.*

THE subject of the following case is a female, who, when about nine days old, was attacked with symptoms of catarrh, in consequence of a sudden exposure to cold in the month of January, attended with considerable discharge from the mucous membrane of the nose, which continued till she was three months old, when it suddenly and entirely disappeared. About a week from this time, symptoms of hydrocephalus, accompanied with an enlargement of the head, commenced. Dr. Foot, of this city, was called upon, shortly after, to visit the child. The usual remedies, calomel, digitalis, epispastics, &c. were employed, but without any effect, the enlargement continuing

* Mem. de l'Acad. de Chirurg. tom. 2. sur la fin.

tinuing to progress. An operation was, at length, thought advisable, with a view to ascertain whether any collection of fluid could be discovered between the dura or pia mater and the brain; but no such accumulation could be detected.

From the constant and gradual increase of the size of the head, every hope of recovery was abandoned, and her physician relinquished his attendance.

When I was requested to visit her, she was two years and three months old; consequently had laboured two years under this disease of the head, which I found of so astonishing a bulk, that I have been induced to present you not only with an account of its dimensions, but also with such other information, relative to the subject, as I have been able to procure from the mother of the child.

The distance between the internal angles of the eyes measured two inches; between the external extremities of the arches of the eye-brows, six and a quarter inches; between the upper extremities of the ears (measured directly across the parietal bones) thirteen and a half inches; between the superior part of the nasal and lamdoidal sutures, along the junction of the parietal bones, twenty inches; the circumference of the head was two feet six and a half inches.

It appears, from the mother's account, that, since the commencement of this enlargement of the head, a total suppression of the mucous discharge from the nose took place, which has never since been observed in the smallest degree, notwithstanding the exhibition of powerful errhines, which were incapable of producing even the slightest act of sneezing. The child cut her teeth at the usual period; but it is a circumstance worthy of remark, that, in a short time after, the upper row gradually softened and broke off even with the gums, while the under teeth remained firm, and are now perfectly sound. The pupils of the eyes are somewhat dilated, though a very evident contraction takes place in consequence of a sudden exposure to light. She hears uncommonly well, and can not only distinguish, with accuracy, the taste between different kinds of food, but, in this respect, exhibits much caprice. At present she prefers bread and milk to any other species of aliment. Her appetite is good, though by no means voracious. During the whole course of the disease, the alvine and urinary discharges have been perfectly regular and natural: her memory is, in no respect, impaired: she evinces a predilection for music; and such is the strength of

of her recollection, that, after hearing an air once sung, she can repeat it, though a lapse of twenty-four hours should intervene. Sometimes she is very lively, and not unfrequently displays the hilarity of her spirits by laughing so loud as to be heard in every part of the room. She moves her left arm with apparent ease, though she cannot elevate the hand to her head. Over the voluntary muscles of the right arm she appears to have lost all controul. In damp weather the pain in her head is most frequent and violent. She is not much inclined to sleep; but, when in this state, moans constantly, and is frequently observed to startle and wake as if in a fright. In bed she is extremely restless, perpetually turning from the one side to the other. The motion of her legs is somewhat impaired. In every respect (the head excepted) her body is of a natural size, though, contrary to every thing that might be expected, she is rather taller than children in general of her age, and no marks of emaciation, or deficiency of action in the lymphatic system, are to be observed. The mother remarked to me, that her other children began to articulate many words so as to be understood when they were one year old; but that this child had not spoken any thing intelligibly till she had attained her second year; but so rapid was the progress she then made, that in three months, from that time, she could not only distinguish, by name, every object which surrounded her, but could communicate to her attendants, without any difficulty, those ideas with which her mind was most strongly impressed. The enlargement of this child's head still continues to progress; and, as she retains her strength, appetite, and spirits, she may probably still live a considerable time: hence it is impossible to say what may be the particular boundaries destined to limit its extension.

It is evident, from the very uncommon size of the head in this case, either that the bones of the cranium must be separated from each other, by the pressure of a fluid internally collected, or that the integuments must have undergone this astonishing dilation, in consequence of an accumulation of water between them and the bones of the head.

That the collection was internal and deep-seated, at the time of Dr. Foot's attendance, is evident, from the result of the operation already noticed.

That the bones composing the head of a child, at this age, should, by a mechanical force, be so separated, as to admit of an uncommon enlargement, I can easily conceive; but

but that a quantity of fluid, sufficient to produce such an effect, should be accumulated in the ventricles of the brain, without being succeeded by marks of serious and more general derangement, was, I confess, altogether unexpected. None of those symptoms could be discovered, which are generally the effects of great pressure upon the nerves at their origin. The mucous membrane of the nose, indeed, appeared to be no longer irritable, and the motion of the arms and legs was somewhat impaired; but, in no other respect, was a diminution of nervous power indicated. Her hearing was uncommonly acute; her perception of objects perfectly distinct; the functions of the stomach and bowels were more regularly performed than is generally observed, even in a state of health; in short, the whole disease appeared to be confined to an increased size of the head, and a diminution of power over the voluntary muscles of the upper and lower extremities.

That the sagittal suture was opened, I have very little doubt, since, notwithstanding considerable pressure, no resistance similar to that of a bony substance could be perceived, although this was perfectly distinct in many other parts of the head.

Do not the circumstances which preceded this child's attack strongly corroborate the opinion of Dr. Garnett, that hydrocephalus is, in its first stage, an inflammatory affection? We find that no symptoms of the disease appeared till the increased discharge (which had been kept up nearly three months, from the child's nose, in consequence of catarrh) was suddenly arrested. This preternatural secretion of the mucous membrane clearly evinced a determination of blood to the vessels of the head; and the discharge from the nose was the mean employed by Nature to obviate the effects of congestion. This once checked, the consequences soon became apparent, viz. a great turgidity of the vessels of the head, and an extravasation into the ventricles of the brain. Such is the plethoric state, particularly of the veins, in this part, that they are distended to more than double their usual size, and bear no small resemblance to those which have been injected for anatomical purposes.

Is it not probable, that if the suppressed discharge could have been immediately restored, or a vicarious one instituted on the first appearance of the hydrocephalic symptoms, all the horrors of the disease might, in this case, have been avoided? This circumstance affords an useful hint to practitioners, as to the *modus medendi* of hydrocephalus

cephalus in general, and serves to point out in what way this affection may very frequently be induced.

The reduction of the upper teeth, from a bony to a soft and gelatinous consistence, may be easily accounted for, as the effect of an excess of phosphoric acid in the blood; but that the under row should not have been operated upon by the same cause, is a circumstance by no means to be so easily explained.

As the child is still living, I shall, for the present, suspend any further observations, and shall give every attention to the different phenomena which may take place from this time to her death, which, it is scarcely necessary to say, I consider as inevitable. These shall constitute the matter of a subsequent communication.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ON the first perusal of Mr. Cuming's reply to my observations on his controversy with Dr. Scott,* I thought it most consistent, as the discussion, from the shape it had assumed, appeared susceptible of no other effort than that of recrimination and personal remark, to consign the matter of debate to oblivion, and to leave to the slow working hand of time the task of ameliorating the petty animosities to which it had given rise. I am conscious that in every instance where individuals are occupied in the pursuits of science, should they reciprocally, by too sanguine an enforcement of their peculiar opinions, give birth to irritability of feeling, a series of impassioned anathemas might occur, unconnected with sobriety of reasoning, and irrelevant to the interest of literary truth. With this impression I conceived your readers would scarcely, on my part, have tolerated a reply *in detail* to the commentary of Mr. Cuming, as it involved no question of medical importance, and appeared almost exclusively a tissue of irritating remarks, evidently originating from that fruitful source, a wounded feeling. I experience no sentiment of regret in making the latter observation. I am no advocate for cynical

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* Medical and Physical Journal, No. 74, Vol. xiii.

cal asperity, nor did I intend the tenor of my reflections to warrant the allegations of Mr. Cuming. In arrogating to myself the defence of Dr. Scott, I was animated by motives of a nature the most independant. I was aware of the urbanity of his private character, and of his ability and zeal in the cultivation of medical science. Regarding his observations as breathing the spirit of a disinterested advocate for truth, and also apprized of his aversion from *medical polemics,* I ventured to take up the gauntlet, bearing in mind the maxim of the great luminary of Roman eloquence: "*Hoc maxime officii est, ut quisque maxime opis indiget, ita ei potissimum opitulari.*"

I should however, from the motives previously assigned, and also from a general state of ill health, have declined any further agitation of the question, had I not conceived a few general suggestions necessary to evince, that my disposition bears little affinity with that of a *cynical Dictator*, and that I am in no shape ambitious, by displaying the petulance and asperity of a Scioppius, or a Dennis, to disprove the opinion of Antoninus, that we are in our nature more immediately prone to a conduct of a different description. — Ὁ ἄνθρωπος ἐνεργέτης πεφυκώς.

I had trusted that my public communications, however feeble in their influence or defective in acumen of remark, might have been considered by Mr. Cuming as faint testimonials of my ambition to be useful in the walks of medical science; and I had presumed they would also have been regarded by inference as unequivocal evidence of my wish to cherish a spirit of liberal discussion in any controversy with my fellow labourers in that department; and never imagined he would deem me hostile to free and liberal enquiries into what regards the cultivation of an art that can only be improved by the united labors and zeal of such of its professors whose sole view is to render it honorable to themselves, and of utility to mankind in general.

I am, &c.

Sunderland, June 9, 1805. G. WILKINSON.

P.S. To find out the preparation of the cuprum ammoniacum, with which Mr. Cuming professes himself to be unacquainted, he must look into those Edinburgh Dispensatories preceding the date of his own; it is pretty well known as an excellent remedy in epilepsy, and is noticed by Dr. Odier of Geneva, in the Third Volume of the Edinburgh Medical Commentaries, and in Dr. Duncan's Medical Cases, published in Edinburgh, 1778.

To

To the Editors of the Medical and Physical Journal.

Gentlemen,

If you think the following fact, shewing the strong anti-variolous power of the vaccine fluid of sufficient importance, you will oblige me by giving it a place in your very useful Journal. I am aware that many of your readers have seen similar instances of protection afforded against variolous contagion, by vacciolation; and I feel regret at occupying your pages, which may be more usefully filled, than by attempts to prove, what no one ought to doubt; but,

Bonum quo communius eo melius.

On which principle I take the liberty of sending you a statement of the case, as it occurred.

A poor woman, named Sibly, who lives at No. 20, Love Lane, Portsea, brought two children to me on the 29th ult. to be vacciolated; I desired her to bring them next morning, when I expected a child to be brought me for inspection, who had been inoculated eight days, and from whom I could do it with recent fluid. She called accordingly (30th) but brought only James, aged two years, and informed me that Mary, aged seven years, had been taken very ill, the evening before, and still continued so, for which reason she declined having her vacciolated, until the fever should be removed.

May 30th. James was this day vacciolated, and was brought to me on the 2d of June, when I was satisfied that it had taken. The mother informed me this day that Mary had the small-pox out very thick, was still very ill, and the head much affected. I desired her to let the children remain together; she said, she had only one bed-room, and consequently could not separate them.

June 5. The vaccine vesicles on James were proceeding favourably, and I was desired to see Mary. She had the confluent small-pox, very full, and was so ill as to require two attendants day and night.

9th. The pocks were filled with an immense quantity of matter; the room was highly offensive, and she moaned piteously; was very restless, except when under the influence of anodynes, which were absolutely necessary to keep her quiet.

11th.

11th. The pocks on her face began to turn, and successively those on the body and extremities. She now became so composed, that anodynes were discontinued.

On James, the vaccine vesicles proceeded in the most regular manner through all their stages, forming the areola, and this day (13th inst.) the horny eschar.

It was highly gratifying to me and the parents of the children, to see James run about the room, jump upon the bed, at the same time eating his hard pudding; it certainly formed a most pleasing contrast to the situation and suffering of the other poor child. If she had been vacciolated (which I would have done, had the mother consented) when her brother was, I think, that, if it had not entirely prevented the variolous disease, it most likely would have rendered it much more mild, by producing only a few distinct pustules, which would have lessened her suffering, the anxiety of her parents, the consequent expence, and subsequent deformity. Her eyes were closed several days, but the sight is not injured.

Two medical friends of Portsea saw the children, and expressed themselves quite satisfied, that the vacciolated child was perfectly secure against variolous infection.

In a book published by, and which I had the honor to receive from, the Royal Jennerian Society,* it is mentioned p. 42, among the probable causes of spurious pustule, "The genuine vesicle having been destroyed at an early stage, and the regular progress of the disease thus interrupted." Since I read this passage I have always vacciolated, *in at least two places*; by so doing, I can always obtain an ample supply of the vaccine principle, both for my friends and myself, without breaking down *all the vesicles*;† indeed, I always endeavour to let one go on to perfection, without interrupting its progress, to ensure the safety of my patient. If children render themselves insecure by scratching the vesicle, which I believe; may not breaking it down to take the vaccine fluid have the same effect? In taking the fluid perhaps we do not destroy *all the cells*,‡ the subject will remain of course secure; but in the

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* Entitled, Address of the Royal Jennerian Society for the Extermination of the Small-pox, &c.

† I am led to make these remarks by reading a passage in Dr. Walker's letter in your Journal for May, p. 456, on breaking down the vaccine vesicle, and Mr. Dunning's comment on the same, in the Journal for June, p. 542.

‡ Suppose we have only one vesicle.

the scratching of children, which is extremely difficult to prevent, the vesicle is nineteen times out of twenty completely destroyed; in which cases, I always revacciolate.

Queen Street, Portsea. I am, &c.
June 13, 1804. SAMUEL HILL.

Description of a DISEASE *incident to the* LYMPHATICS, *and a new Species of Anatomical Injection; by Mr.* RAMSAY, *Anatomist, of New York.*

PERMIT me, through the medium of your useful work,* to offer to the consideration of your learned readers a case, I believe, hitherto unnoticed, to which the lymphatic veins are liable. This discovery I made while a pupil of the justly-celebrated Cruikshank, of London. The year I forget, as my notes on this subject are in Europe.

Every anatomist must have observed, that lungs which have been subjected to violent and protracted morbid action, have often their lymphatic veins conspicuously dilated and opake. In forming a preparation of that organ, in this state, I was struck with the obstructions the quicksilver met with, more especially where the vessels, by their thickened coats, distension, and perfect whiteness, promised a happy injection. Upon minute attention to the cause, I was convinced that the sides of the vessels had grown together. For many years, especially after I became a teacher of anatomy at Edinburgh, where a large field of practical anatomy offered me opportunities of observation, this part of pathology became an object of my particular attention; and I seem to have detected, not only the incipient, but progressive and highly-diseased stages of the lymphatics in all parts of the system.

It is natural that the human mind, in such striking phenomena, which offer an ample scope to the most interesting consequences, should endeavour to scan the cause, and, if possible, prescribe the cure, or alleviate the evil. I shall only take the liberty, however, of here suggesting what has occurred to me, so far as the disease assumes different stages, and why the lymphatic veins may, by their peculiar offices, be liable to this peculiar affection.

The sanguiferous veins are liable to a thickening of the coats, so as frequently to assume the open mouth of an artery; and this often seems to occur in subjects where the

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* The Medical Repository, 1804, from which this paper is extracted. Edit.

the arterial system is languid. I have supposed, in such cases, the appropriate arteries, which nourish the veins, are excited to an increased action, by the stimulus occasioned by congestion in the veins. In such veins I have distinctly demonstrated the muscular coat. There can be no accretion, however, of the cavity of the sanguiferous veins, as they continually receive their contents by continuity of canal, from their corresponding arteries. But there is a marked difference between the sanguiferous and lymphatic veins; the latter receiving their contents from the surfaces of the system, the propagation taking place by some means we seem not fully to comprehend, though it is possible, as the blood seems the appropriate stimulus of the arteries, the lymph becomes the appropriate stimulus of the lymphatic veins. That these vessels have muscles I believe, which are roused into action by their contents; and every day proves to us, that they, and their glands, possess the highest irritable principle, from the indurations of glands, and dilatation of the veins, where the lymph is tainted with any noxious quality.

If I am correct in the existence of this disease, it may explain many morbid phenomena. Justly celebrated authors have supposed a peculiar principle of life in the blood. If my memory serves me, some one draws inductions from the coagulum found in an aneurismal sac, which had been included by the ligatures of operation; and this coagulum was supposed to be found unchanged after years had elapsed. May not lateral branches of arteries and veins of such a sac have been conveying new blood continually, the lymphatics carrying off the superabundance, and the coagulum found be really more recent than is supposed, but coagulating constantly from the inaction of the sac? The vital principle of the blood appears to me not only plausible, but true; and I see not why the idea may not be extended to the lymph. In such lungs, however, as I injected, the lymph seemed in some peculiar morbid state; and when it is propagated towards a portion in a state of accretion, as this fluid is prevented from returning retrograde by the valves, if lateral branches are not sufficiently capacious to carry off the fluid, there must be a real stagnation; and several eminent practitioners have remarked to me, since mentioning the circumstance in my lectures at Edinburgh, that they had traced diseases, ulcers, &c. from seemingly this cause.

I have been used to offer, as a practical hint on the two venous systems, which are indirectly affected and dependent on the state of their corresponding lymphatic and san-

 guiferous

guiferous arteries*, that we should aim at producing tone in the arterial system, by the stimulus of air, exercise, warm or cold bath, friction, &c. in preference to applications of violent medicines by the stomach, or mercurial frictions; by which means I have often succeeded in exhibiting medicines, when the system had acquired general vigour. As congestion in the sanguiferous and lymphatic veins destroy these valvular apparatus, their contents are not only not supported (which occasions effusions) but the fluids are not propagated so as to return and nourish the system. Exercise, then, or friction (avoiding the least approximation towards fatigue) in the course of circulation, where natural action is wanting, empties the veins, often banishes pain and anxiety, exhilarates the system, by propelling the contents, exciting action and nutrition, and checks dilatation of the vessels.

I shall now add an anatomical injection I have lately contrived, which I have not yet brought to that perfection I wish; but it is my duty, as a citizen of the world, to sacrifice my pride to the general benefit, relying on the indulgence of a generous community, whose extensive means may ripen our feeble attempts into real advantages. The very fine injections for anatomical purposes, composed of cinnabar and varnish, do not really always give a true idea, as they produce effusion, which may please the vulgar eye, without illustrating science. The wax injections, in some respects, are inconvenient, from the heat they require, as well as the warmth to which the subject is usually exposed, which often destroys the natural structure and appearances. The following injection seems to run minutely, and keep fluid a sufficient time to enable us to inject leisurely (very important in some cases which wax injections forbid);—it requires no heat, neither does the subject; and although thrown fluid and cold into the vessels, it hardens in thirty minutes or less. It is rather brittle. Chemistry may some day obviate this. It is not, however, so subject to expansion as the wax; hence it may be exposed to the greatest heats, in warm climates, without endangering extravasation or rupture. I have only tried this injection with the calces of lead, as the colouring ingredients;

* I divide the veins into sanguiferous and lymphatic; and the extreme rami of the arteries into effusori, or *open-mouthed arteries*, which include every species of nourishing, lubricating, or excreting arteries; and *sanguiferous* arteries, which, by continuity of canal, convey the blood to the veins.

dients; but, I presume, any calx or pigment may be found equally effectual. The calx is reduced to a very fine state and mixed with linseed oil, the same as found in the shops for painting. This, however, seems most successful when the paint is of a very thick consistence, admitting the more readily of the other ingredients to be mentioned. Mix the paint with a varnish composed of equal weights of spirit of turpentine and rosin, till it acquires the consistence of cream; saturate the fluid with water, of which it takes up a considerable quantity; throw it into the vessels, and it will harden in about half an hour, if the proportions are just. I suppose, as the hardening depends on the water, moistening the calx with water, previous to grinding it with the oil, will be a more simple process, and equally effectual as the above.

To Dr. BRADLEY.

SIR,

THE following mode of preparing a saline draught will be found to produce one as agreeable, and in some cases more efficacious than the one in general use, composed of the carbonate of potass and the citric acid. The citric acid is often scarce; sometimes impure and expensive: the ingredients of the other are always to be had; they are cheap, and never vary in quality.

℞. Sub-boras sodæ gr. xv. super-tartris potassæ ʒß. solve terendo in mortareo cum lact. amygd. ℥x. dein adde syr. simpl. aq. cinnam. a. ʒj. f. haust.

If you should think the above prescription worthy of being more generally known, have the goodness to insert it in the Medical and Physical Journal.

Yours, &c.

Artillery Place, June 17, 1105. JAMES HAMILTON.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ALWAYS vaccinists from principle, and now from a conviction, which has arisen out of very extensive opportunities for observation, many of the medical practitioners in

in these towns will never hesitate to publish from time to time the results of their experience in the practice of vaccination, whatever these may be; indeed, were they sometimes, for instance, on occasions like the present, to neglect such communications, they would certainly ill discharge those duties which attach to the profession, and which, therefore, the public have a right to expect from them; for these reasons, I hope you will give a place in your next Journal to the following letters, with which I have been just favoured from three highly respectable surgeons resident in this town and Stonehouse, which immediately adjoins it. I saw the cases which they record; connected with the appearances on Master Rendall's arm, which are faithfully detailed in my minutes; with some of Mr. Goldson's cases; with some of the experiments instituted at the Vaccine Institution; with those of Dr. Rollo; with the cases of the Rev. Mr. Hitchins's child; Mr. Wallis's; and with some others of a similar description, which, if necessary, can be adduced. These communications incontrovertibly establish, I think, the modifying power of the vaccine over the variolous principle, where the former has been inadequately or imperfectly impressed. This idea, which early struck me, was for some time entirely resisted by many medical men here, who now most unequivocally subscribe to it. The question then is, whether this imperfect action of the vaccine virus arise from circumstances previous to or adventitious during the process of vaccination, or *necessarily from a high variolous susceptibility, which a single vaccination, (complete in all its characters as far as we can ascertain them) cannot entirely subdue that susceptibility,* which, when rouzed into action by casual exposure, invariably and rapidly sweeps away the miserable objects of it, and which, when excited by art, always subjects to the severest disease, very often mutilates, and very often destroys.

A fruitful source of *incomplete vaccination,* we are taught by the highest authority, will be found in herpetic eruption. Speaking of herpes in the last Journal, Dr. Jenner observes, that this establishes every gradation of *vaccine insusceptibility,* from that which subjects to no risk of future variolous impression to that which denies all security against it, or becomes what I have termed spurious vaccination. Dr. Jenner's words are, "During the presence of herpes there may be no imperfection in the vaccine pock, and there may be, and there certainly is, every gradation between that slight deviation which is of no consequence, up

up to that which completely denies all security." Another source of incomplete vaccination at least is found in the use of too early or too late fluid; taken any considerable time on either side of the acme of the vesicle, this must be less active or less perfect; for, as I have elsewhere said on the same subject, "sunt certi denique fines, quos ultra citraque nequit consistere rectum." The coincidence of the broken vesicle, with every case of secondary variolæ which have hitherto fallen under my own observation, has been so uniform and remarkable, that it justifies, I think, (at least so long as we are at a loss for other more satisfactory causes of *incomplete vaccination, I do not say of failures)* all the importance which has been deduced from this circumstance. The following cases, and that given us by Mr. Forbes in a very excellent and discriminative paper in the last Journal, for which I beg him to accept my thanks, tend directly to countenance a belief that we have in this source a very frequent cause at least of secondary variolæ. Stephen Brown was infected in one arm only, and John Heath was vaccinated from this arm; the small-pox which occurred in Brown were of the mildest kind, and very early reached maturation; on February 15, red spots only appeared, on the 19th, matter was taken from them for inoculation?

Quere. Were not these secondary variola or variolæ modified by previous inoculation.

Aboriginal variolous insusceptibility at the time of vaccination, (under which condition of the system there is much reason to believe that vaccinæ, perfect or nearly perfect in all their characters, can sometimes be produced and regularly transmitted to other subjects) will in all probability be now and then a source of *regular small-pox, or small-pox of every description* subsequent to vaccination. Here the anti-vaccinist exultingly tells us, that we have neither constitutional affection nor eruption, that is, *neither fever nor abscess,* to assure us when our object has been obtained; that the absence of these desirable concomitants in subjects of the inoculated small-pox always places them on their guard. Granted, it may be a little deficit, we leave him in the enjoyment of this inconsiderable and exclusive advantage, and heartily congratulate ourselves, and our little patients, on their exemption from those dreadful accessories.

Casual observation, and the results of some experiments purposely undertaken, will enable me I hope, by and by, to offer some minutes and remarks on the different influences of

of the vaccine principle on subjects of different variolous insusceptibilities; these insusceptibilities are derived to the human body from different sources; from inoculated small-pox, from vaccination, from high degrees of herpes, of psora, and, perhaps, from some other conditions of the skin; there exist also, constitutionally, temporary and permanent insusceptibilities; each of these insusceptibilities, I have reason to believe, prevents a specific excitability or modification relatively to the vaccine principle. Such enquiries as these are apparently minutiæ, and of course the cui bono of them will not be evident to all; those however who think with me, that we are yet perhaps in limine, with respect to the physiology of the skin, and exanthematous affections, will venture to believe, that these and similar investigations may be prosecuted with ultimate usefulness.

Notwithstanding our united and zealous exertions in the cause of vaccination, I grieve to add that not less than one hundred and fifty adults and children in this town only, Dock, (I do not include Plymouth and Stonehouse) have been destroyed by the small-pox within the present year; *fifty were destroyed by it in May*, and its victims continue to die daily in the same proportion; these melancholy events we believe have entirely followed the introduction of this spotted pestilence among us by the inoculations of an old superannuated common labourer. This man, I am told, armed with a thousand horrid tales of cow-pock mischief, first literally scares or conciliates the timid and the prejudiced, and then, with matchless impudence and unfeeling, introduces the deleterious poison into their families, and thus spreads it in every direction. Shocked the more at this dreadful destruction of human life, because convinced that nearly the whole of it might have been, and that repetitions of it can be, prevented, I ask with every possible respect, but with the most anxious solicitude, whether this subject be wholly unbecoming the dignity of some legislative or magisterial enquiry? While we hear with vast satisfaction the small-pox have been nearly exterminated from Berlin, Vienna, and some parts of France, we must lament that we have been out-stripped here in the great cause of humanity. I make the following extract from a letter replete with acute remark, highly favourable to the interests of vaccination, with which I was favoured three days ago by Mr. Bryant, surgeon at Callington, whose extensive practice has afforded him an opportunity of seeing a great deal of both inoculations: "About three years since I was applied to on a sudden emergency to inoculate

inoculate about forty people, of all ages, on the breaking out of the small-pox in their neighbourhood; not having variolous matter which I could depend on, I vaccinated the whole, and three days after having procured efficacious means, I inoculated all with small-pox whom I judged had not been certainly infected with the vaccine lymph. About twelve of these were infected with cow-pock in one arm, and small-pock in the other; the progress of each seemed to go on perfectly well, without the least effect on one another, to the point of eruption, the variolous arm shewing marks of eruption at the usual period though three days later than the other; but neither patient was disordered, nor had either an eruption; though those who had failed taking the vaccine infection, and consequently had the small-pox alone, had the usual symptoms and eruptions, but not many." I am, &c.

Dock, June 13, 1805. RICHARD DUNNING.

"To Mr. DUNNING, Surgeon.

"Dear Sir,

"KNOWING no medical man in this neighbourhood, who has evinced a greater degree of laudable zeal for the introduction and propagation of vaccination than yourself, nor any person who has laboured more diligently to impress on the minds of the inhabitants of this place, a due sense of its importance; thinking also, as you do, that every case of failure, in place of being concealed ought to be openly avowed and acknowledged, I feel no hesitation in communicating to you a brief history of an instance of that kind which lately occurred to me in these Barracks. How far the nature of the case may correspond with some of your late ingenious conjectures, I must leave you to judge.

"About two years and a half ago, I inoculated the male child of a Sergeant Ward in both arms with fresh vaccine virus, taken at the time from the arm of another child. The infant inoculated was then about six weeks old; this first inoculation failed, as did also a second and a third. By much persuasion the mother at length allowed me to make a fourth trial, which was done, as in the former instances, with fresh matter. I saw no more of the child until the seventh day after inoculation. On inspecting the arms, the virus appeared to have produced no visible effect on the right, but on the left completely so. *The apex of the vesicle however appeared to have been broke,* and the

the mother informed me, that in the morning she found *the shirt adhering to it slightly.* The areola was about half formed, I mean as to its greatest diameter, for it spread afterwards to about the breadth of a half crown piece. I saw the child frequently afterwards, and as every appearance exhibited the characteristic mask of genuine vaccination, I confess, I considered him as perfectly secure. I was however not a little surprized about the middle of last month to hear, that this same boy laboured under very benign and distinct small-pox. As both you, and our ingenious friend and neighbour Mr. Little, saw the child both before and after I was acquainted with the circumstance, it is unnecessary for me to make any observations on the nature of the disease. I believe you were both agreed, that the child laboured under general variolæ, but certainly of an irregular kind; because the pustules were in a perfect state of maturation on the fifth day after the first appearance of eruption, and completely desiccated by the eighth. There is only one other circumstance which I wish to mention relative to this child, and that is, that on examining the left arm the foveola or indentation, always I believe observable after perfect vaccination, is in this subject extremely small. This, and similar cases, will not at all lessen my confidence in vaccination.

"I am, &c.

"JOHN MAGIN,

"Surgeon, Plymouth Division of Royal Marines.

Royal Marine Infirmary, May 22, 1805."

In reading this case, every person will be struck with the vaccine insusceptibility of the subject of it; the cicatrix is indeed so slight that even repeated and accurate examinations of the arm are almost necessary to discover it.

R. D.

"To Mr. DUNNING.

"Dear Sir,

"Connected with the cases of secondary small-pox is the following, which I beg to give you. On May 17, 1800, I vaccinated the daughter of Mr. Luscombe, then about five months old; it took in one arm only, and the character of the vesicle was thought perfect, so as to produce the necessary constitutional impression and consequent protection. She has been twice since intentionally exposed to small-pox contagion, which was resisted in each instance.

stance. In the beginning of this month (May) she was again exposed to a highly variolated atmosphere, wherein a child lay ill of that disease, and *in a few days after was attacked with fever and sickness;* this left her on the same evening; she remained well the two following days, when fever commenced, and a few eruptions followed on the face, trunk, and extremities, in number about forty or fifty; they continued four, and a few of them five days, when they completely and almost suddenly desiccated; an appearance of a peculiar kind was remarked, surrounding some of the largest of these eruptions on the body as they went off; that of a *distinct fringed circle,* rather more than half an inch from the centre of the pustule, (but unaccompanied with an inflamed base) so much resembling that which often defines a well marked vaccine vesicle just beginning to decline; this is a peculiarity which I have never seen in any eruptive disease except the vaccine (some varieties of tetter more resemble what I mean).

This appearance, which forcibly strikes me, and which I believe is an occurrence *depending upon previous vaccine impression not having completely pervaded the system, but yet enough to modify the small-pox, and totally disarm it of all its malignity,* is of too much importance to be passed over without particular notice, and ought to excite our nicest attention to the state of the skin in particular, which we now know so well from experience is such as often to derange the due action of the vaccine virus, when least suspected. When we are also aware of the very nice laws by which its action is impressed in very many instances, so as to elude our nicest observations, and yet permanent security obtained, we must not feel disappointed at the very few cases of *secondary small-pox* which we have seen, but follow up with increased ardour and increased observation this invaluable discovery. Let us do this, and I feel persuaded, nay almost convinced, that further time and proper observation will enable us by and by to explain the causes of, and the anomalies met with in, those constitutions, on which the partial failure depends. What I have remarked, appears to me, to apply to all the cases of *secondary small-pox* which I have seen after *incomplete vaccination;* that there *is a chain of peculiar modification,* by which they have been all characterized, whether they have been from *casual infection or inoculation,* bespeaking *the identity of the exciting vaccine principle partially obtained.* This child having been vaccinated among some of the earliest subjects in this place, I am not prepared from memory

mory to say if any thing particular occurred at the time; whether the pustule might have been broken, or matter taken from it for other inoculations; these were circumstances, at that time, not so well attended to as they deserve. I am, &c.

Dock, May 29, 1805. "D. LITTLE"

I never saw the effects of broken vesicle more strongly marked than on this child's arm, and Mr. Little has said he cannot doubt his having opened it. R. D

"To Mr. DUNNING.

"Dear Sir,

"Understanding that you are about to publish a few instances of variolous eruptions which have taken place in this town after inoculation for the cow-pox, I am induced to send you the history of a case of this kind, which has lately occurred in my practice, which, from particular circumstances, appears to me to admit of some explanation, and not to militate against the practice of vaccination. If you consider it worthy of attention, it is at your service to dispose of it as you think proper. About four years since I vaccinated the fourth child of Mr. Bryant, in King Street, then about seven weeks old; she received the infection perfectly on one arm, but the operation failed on the other; at an early period of the vesicle, the eighth day or succeeding day or two, I took the fluid freely for inoculation, breaking down the vesicle, and allowing as much to escape as I could obtain for my purpose at every application of the lancet. I know of no remarkable circumstances attending the future progress of the arm during the desiccation and cure. On the 10th of last month (May) I was called to visit this child, to see some eruptions which were then making their appearance, and were suspected to be small-pox. I did not hesitate to say immediately that I thought them small-pox; but from the distinctness of them, confided in their going on with perfect safety to my little patient, although she was tolerably well sprinkled. On the following day I was confirmed in my prognostick, that they were mild, and certainly felt justified in declaring it as my opinion that they were *peculiarly affected by the previous inoculation* (the vaccine); they might fairly be called *vaccinated variolæ*, by which I mean variolæ produced under the influence of a certain vaccine state of the constitution,

constitution, and which it appears to me probable, had reduced both the rise and progress of the eruption to a state vastly more favourable than is usually the case where no such previous affection has existed. I wish to remark a very striking appearance during the inflammatory stage of these eruptions, as the reason *for my laying emphasis on the previous effect of the vaccine inoculation* on the habit. It is, that the areola surrounding them was to a much greater extent than the redness seen to surround small-pox in the ordinary way, and if viewed at a little distance they appeared more like small *vaccine vesicles* than genuine variolæ; only, of course, not so flattened at the apex. In the cicatrix or mark remaining at the place of inoculation, instead of the usual appearances of an even surface, excepting some small and rather regular puncta, such as may be seen on the rind of a lemon, or nearly like them, *there is a seam,* such as is observed *after the healing of a part which has been scalded and healed irregularly.* This I take to be *owing to the violence done to the vesicle while breaking it down for the purpose of extracting the contained fluid.* The result of this case has not destroyed the confidence of the parents in the preservative power of cow-pox, for about twenty days since I vaccinated another infant in the same family, who has gone through the inoculation satisfactorily, though it only took effect in one arm; and I now hope the infection of small-pox has not previously taken place; the child has not been kept from its sister, nor have two others who were vaccinated some years since; they resist the small-pox. This case, as well as others attended with *similar circumstances and consequences,* strengthen my confidence in the propriety of vaccine inoculation, *for they are all instances of infection in one arm only where the vesicles have been broken down early, and the fluid consequently allowed to escape, and have been generally coupled with other subjects in the same families who resist small-pox subsequently to being inoculated with cow-pox, although exposed to its influence at the same time, and in an equal degree.* Future experience must determine, whether the breaking down a single vesicle at an improper period (which I must at present believe to be the most general impediment); some idiosyncrasy of the constitution, which regulates the susceptibility; or what other causes, interfere to prevent in individual cases *complete saturation;* there may be many; these I leave to abler practitioners to determine, of what number and description, while I cannot help

help expressing my warmest hope that such investigation will be attended with every success, and ultimately tend to the general adoption of the Jennerian practice.

I am, &c.

Dock, June 9, 1805. JOHN J. SMITH.

Botanical Description of British Plants.

(Continued from vol. xii. pp. 554—560.)

PENTANDRIA. PENTAGYNIA.

69. LINUS. *L. usitatissimum. L. arvense. L. sativum. Ang.* Flax.

Gen. Desc. Cal. five leaved. Petals five. Caps. five-valved, ten-celled. Seeds solitary.

Spec. Desc. Leaves alternate, spear-shaped. *Cal. caps.* dagger-pointed. *Petals* scolloped, sky blue, scored with darker lines. *Stem* generally solitary, cylindrical. *Filam.* united at base. Styles blue, thicker towards the top. Inner edge of cup fringed. *Corn fields, sandy pastures.* BLOSS. July.

Use. This valuable plant came originally from those parts of Egypt that are exposed to the inundations of the Nile; and it is said there to rise with a strong stem to the height of four feet: but it is now a native of Britain, and its utility in arts, manufactures, and medicine, have rendered the cultivation of it an object of particular encouragement. The *seeds* have an unctuous mucilaginous smell, and yield, by expression only, a large quantity of oil, which when carefully drawn, without the application of heat, has no particular taste or flavour, and is an excellent pectoral. Boiled in water, they afford a large proportion of strong flavourless mucilage: infusions and decoctions of them, like other vegetable mucilages, are used as *emollients* or *demulcents* in hoarsenesses, coughs, and pleuretic symptoms, which frequently prevail in catarrhal affections: they are also recommended in nephritic pains and stranguaries: for these purposes a spoonful of the seeds unbruised is said to be sufficient for a quart of water. The seeds are also much used externally in *emollient* and *maturating cataplasms,* and make an easy and useful poultice in cases of external inflammation. The expressed oil is supposed to be of a more healing and balsamic nature

 than

than other oils of this class; and has therefore been very generally employed in pulmonary complaints, also in cholics, and constipations of the bowels: in some of its prp erties it differs considerably from most other oils of this kind; not congealing in winter, not forming a solid soap with fixed alkaline salts; and acting more powerfully than any other as a menstruum on sulphureous bodies. When heat is applied during the expression, it gets a yellowish colour and a peculiar smell: and in this state it is used by painters and varnishers. Linseed appears to afford but little nourishment, and when taken as food has been found to impair the stomach and produce flatulency: these effects are noticed by Galen, and have since been confirmed by the experience of Tragus, during a season of scarcity in Zealand, where boiled linseed was used as food, and occasioned remarkable distention of the hypochondria, swellings of the face, and other parts, which in some instances proved fatal. *Ray, Hist. p.* 1073. But the farinaceous part which remains after the oil is expressed, called *oil-cake,* is given to oxen with advantage, and they soon fatten upon it. The longitudinal fibres of the bark, separated by maceration in water from the glutinous matter which connects them together, dried, beaten, and combed, are spun and manufactured into linen: of this linen, when worn to rags, is made paper. The water in which flax has been macerated is poisonous to cattle, and therefore the practice of steeping it in any running stream or common pond is prohibited by statute. See 33 Hen. viii. chap. 17. —*Woodville. Withering.*

70. Linus. *L. catharticus.*

Ang. Purging flax. Mill mountain. Dwarf wild flax.

Gen. Desc. As above.

Spec. Desc. Leaves opposite, egg-spear shaped. *Stem* forked. *Bloss.* pointed. Before the flowers open they hang down. *Cal.* edge fringed with minute glands on foot stalks. *Filam.* united in a bag inclosing lower half of germen. *Dry pastures.* Bloss. May, July.

Use. A drachm of the dried plant pulverised, or an infusion of a handful of it in whey or water, *(Lightfoot)* or an infusion of two drachms or more of the dried plant, is an excellent and safe *purge,* and has been given with advantage in obstinate *rheumatisms.* It frequently acts as a *diuretic.—Withering.* A decoction of the whole plant is a very rough purge, much used among the country people. —*Hill.* Horses, sheep, and goats eat it.

71. Drosera.

71. Drosera. *D. rotundifolia. Ros solis.*

Ang. Round leaved sundew. Red rot. Youth wort. Moor grass.

Gen. Desc. Cal. five div. Pet. five. Caps. one cell, five valves at top. Seeds several, fixed to the sides.

Spec. Desc. Stalks from the root. *Leaves* circular. *Styles* six. *Leaf-stalks* fringed at the base. *Blossom,* white. *Mossy bogs.* Bloss. July, Aug.

Use. The whole plant is acrid, and sufficiently caustic to erode the skin; but the ladies know how to mix the juice with milk, so as make it an innocent and safe application to remove freckles and sun-burn. The juice that exudes will, unmixed, destroy warts and corns: this plant has the same effect upon milk as the pinguicala vulgaris; and like that too, is supposed (particularly in the Scotch Highlands, *Lightfoot)* to occasion the rot in sheep. The name of *sundew* seems to be derived from the striking appearance of these plants; the leaves being fringed with hairs supporting small globules of pellucid liquor like dew, which continue even in the hottest sun. Perhaps its acrimony resides in this secreted liquor.—*Withering.*

Class VI. Hexandria.

Hexandria. Monogynia.

1. Allium. *A. arenarium.*

Ang. Sand garlic.

Gen. Desc. Bloss. six pet. expanding. Sheath dry, skin-like, many flowered; umbel, crowded; caps, superior, three-celled.

Spec. Desc. Stem-leaves flat, umbels bearing bulbs. Umbel-sheath, pointless. *Stamens,* three-pointed; *half-sheaths,* cylindrical. *Bulbs and blossoms,* blue or purple. *Stem,* two to four feet high. *Mountains in Westmoreland.* Bl. June, July.

Use. This is eaten along with other pot herbs. It communicates its flavor to milk and butter of cows that eat it. —*Withering.*

2. Allium. *A. oleraceum.*

Ang. Wild garlic.

Gen. Desc. As above.

Spec. Desc. Leaves semi-cylindrical, hollow; umbels bearing bulbs. Filamens undivided. *Root* a solid bulb, egg-shaped, numerous. *Stem* two or three feet high, bent at the top, smooth, solid. *Bloss.* pale green with purple lines. *Pastures, Cornfields.* Bl. July.

Use.

Use. The tender leaves are very commonly boiled in soups, or are fried with other herbs. Cows, goats, sheep and swine eat it.—*Withering.*

3. Allium. *A. ursinum.*

Ang. Ramsons. Ramson garlic.

Gen. Desc. *As above.*

Spec. Desc. *Leaves from the root*; spear-shaped on leaf-stalks. *Stalk naked*; three-square, below cylindrical. *Umbel* flat-topped. *Flowers* large, numerous, white. *Woods, hedges, dry meadows.* Bloss. May.

Use. An infusion of this plant in brandy is esteemed a good remedy for the gravel. *Pennant,* 1772, *p.* 175. Other plants do not flourish in its vicinity.—Cows eat it, but it communicates its flavour to their milk and butter, so strongly as to be very offensive in the spring.—*Withering.*

Note. The garlic commonly cultivated in our gardens, which is a native of Sicily, (A. sativum) is that which is much used in medicine: it is an expectorant in pituitous asthmas, &c.; as a diuretic in dropsies; as a febrifuge in preventing the paroxsysms of intermittents, and even subduing the plague: as an anthelmintic, an antiscorbutic, and as a powerful lithontriptic: it has also been applied externally to tumours and cutaneous diseases, and has been used successfully in certain cases of deafness. *Woodville. See Hoffman, Rosenstein, Tauke. Lind, Lobb de dissol. calc.* c. 10. *Sydenham de variolis conf. Bergius, and others.*

4. Ornithogalum. *O. luteum. Bulbus Sylvestris.*

Ang. Yellow Bethlem Star. Star of Bethlehem.

Gen. Desc. Bloss. six petals, upright, permanent, above the middle expanding; filaments, alternately dilated at the base; caps, three-celled.

Spec. Dec. *Stalk* angular, two-leaved, four to six inches high. *Fruit-stalks* in an unbranched umbel, sometimes solitary. *Root-leaf* generally single, longer than the stem: stem-leaves three or four, unequal. *Leaves* fringed with fine hairs. *Umbel-sp.* three to seven, each with one flower. *Petals* in two series, the inner greenish yellow, the outer green. *Moist sandy places; wet woods.* Bl. April.

Use. The bulbous roots of this whole genus are nutritious and wholesome, and those of this species have been employed for food in times of scarcity of provisions.—Horses, sheep and goats eat it: swine are not fond of it: cows refuse it. *Withering.*

5. Narthesium. N. *ossifragum. Asphodelus Lancastriæ.*

Ang. Lancashire asphodel. Bastard asphodel. Lancashire king's spear.

Gen. Desc. Bloss. six pet. permanent. Style 0. Caps. egg-shaped. Seeds tapering at each end.

Spec Desc. *Stem* ascending, four to nine inches high. *Pet.* strap-spear-shaped, concave, expanding, outside greenish, yellow within. *Filam.* woolly, yellow. *Anthers* scarlet. *On turf bogs.* Bl. July, August.

Use. This plant is believed in Sweden to be noxious to sheep: and is supposed to soften the bones of animals that eat it; but this opinion wants confirmation. Cows and horses eat it. Sheep and swine refuse it.—*Withering.*

6. Asparagus. *A. officinalis.*

Ang. Asparagus, Sparagus, Sparrowgrass, Sperage.

Gen. Desc. Bloss. six div. upright. Inner petals, tops reflected. Berry sup. three-celled. Seeds two.

Spec. Desc. *Stem* herbaceous, cylindrical, upright, panelled. *Leaves* bristle-shaped; leaf-scales solitary or in pairs. M. and F. fl. sometimes on distinct plants, but not when cultivated. *Bloss.* bell-shaped, yellow green; fl. M. Fem. or hermaph. *berries* red: seeds one to three. *Meadows and rocks on the sea coast.* Bl. July.

Use. The young shoots, in a cultivated state, are universally esteemed for their flavor and nutritious qualities. They impart to the urine the scent that is perceived on the water in which they have been boiled.—*Withering.*

7. Convallaria. *C. majalis.*

Ang. Lily of the valley. May Lily. Lily Solomon's Seal.

Gen. Desc. Bloss. six-cleft. berry three-celled, superior. Seeds two.

Spec. Desc. *Bloss. bell-shaped,* contracted at the mouth, segments reflected, white, highly fragrant. *Stalk* naked, semi cylindrical; *flowers* spiked, nodding, few, growing from one side. *Berries* red. *Woods, heaths.* Bl. May.

Use. The flowers, though highly fragrant, have, when dried, a narcotic scent. Reduced to powder they excite sneezing. An extract prepared from the flowers, or from the roots, partakes of the bitterness, as well as of the *purgative* properties of aloes: the dose from twenty to thirty grains.—By the assistance of lime a beautiful and durable green colour may be prepared from the leaves.—Sheep and goats eat it: horses, cows and swine refuse it.—*Withering.*

8. Convallaria. *C. polygonatum.*

Ang. Sweet smelling Solomon's Seal.

Gen.

Gen. Desc. *As above.*

Spec. Desc. *Leaves* alternate, embracing the stem. *Stem* two-edged. *Fruit-stalks* axillary, mostly one-flowered, long, hanging on the opposite side. *Flowers* white, with a green line on each segment, bent in. *Berries* black. *Rocky woods.* Bl. May, June.

Use. The root is used in Medicine: it is of a mucilaginous quality, and has long been used as a discutient poultice to various kinds of tumours, but more particularly to bruises accompanied with extravasated blood in the cellular membrane. It is also recommended as a cosmetic; and in Galen's time, was used by women to remove pimples and freckles from the skin. Of its astringent effects internally, there can be no well-grounded expectation. The berries, flowers and leaves are extremely acrid, and are said to be of a poisonous quality.—*Woodville.* In seasons of scarcity the roots, which contain a considerable proportion of farinaceous matter, have been used for making bread.—*Bergius, Withering.* Horses, cows and swine refuse it.

9. Convallaria. *C. multiflora.*

Ang. Common Solomon's Seal.

Gen. Desc. *As above.*

Spec. Desc. Leaves alternate, embracing a cylindrical stem. Fruit-stalks axillary, many-flowered, branched. Flowers smaller than C. Pol. white tipped, with green. Berries black. *Woods.* Bloss. May, June.

Use. The roots of this species also have been employed for making bread; and its young shoots are eaten by the Turks as Asparagus.—*Withering.* To this species the root used in medicine is very generally referred by writers on the Materia Medica.—*Woodville.*

10. Hyacinthus. *H. non-scriptus.*

Ang. Harebell hyacinth. English hyacinth.

Gen. Desc. Bloss. bell-shaped, permanent; segm. rolled back: germen with three nectariferous pores at the top.

Spec. Desc. Bloss. tubular-bell-shaped, six deep divisions, pendent, fine blue, sometimes white: *floral-leaves* in pairs. *Woods, hedges.* Bl. May.

Use. The roots of this plant serve well for the manufacture of starch. When fresh they are poisonous —*Withering.*

11. Acorus. *A. calamus.*

Ang. Myrtle flag. Sweet smelling flag, or calamus. Sweet myrtle grass.

 Gen.

Gen. Desc. Spadis cylindrical, covered with florets; pet. six, naked. Style 0. Caps. three celled.

Spec. Desc. *Floral-leaf* much longer than the spike. *Sp.* three inches long, closely studded with florets set spirally. *Root* decays annually, two new ones shooting from the crown. *Stem* flatted, bordered with a leafy edge, above the insertion of the spike expanding into a leaf. *Leaves* sword-shaped, sheathing each other, some plaited in a serpentine line. *Spike* proceeding from the edge of the leaf. *Petals* skinny, thin, crowned with a kind of horizontal hat. *Banks of rivers with a muddy bottom, stagnant waters.* Bl. May, June.

Use. The root, in its dried state, has a moderately strong aromatic smell, and a warm pungent bitterish taste. Water is found to extract the bitter, and rectified spirit the aromatic matter. Though not heating, like spices, this root, manifesting to the taste considerable pungency and a moderate share of bitterness, has been therefore deemed useful as a warm stomachic, and was formerly much used here in combination with the more simple bitters, which, by this addition, were rendered more grateful and carminative. It has been recommended in vertigo proceeding from a vitiated stomach, and in intermittent fevers, which are said to have been cured by this root after the bark had failed. It is also said to be efficacious in scorbutic and hæmorrhagic complaints; but to this little credit will be given, and still less to its supposed alexipharmic power.—*Woodville.* This plant grows wild in moist places in Japan, where it was considered, on account of its strong aromatic taste, to be a medicine of great powers; but they do not there know its true and proper use.—*Mr. Hincks.* It is the only truly aromatic plant which is a native of northern climates.—*Linn.* The root powdered might supply the place of foreign spices; it has cured agues, when the Peruvian bark has failed: the flavor of the root is greatly improved by drying. This root is commonly imported from the Levant, but those of our own growth are full as good. The Turks candy the roots, and think they are a preservative against contagion. Neither horses, cows, sheep, goats, nor swine will eat it.—*Withering.*

12. Tamus. *T. communis.*

Ang. Bryony Lady-seal. Black briony.

Gen. Desc. Fl. m. and fem. in different plants. Cal. six-div. Bloss. 0. Fem. style three-cleft. berry three-celled, beneath. Seeds two.

Spec. Desc. *Root* large. *Stem* twining. *Bloss.* greenish; *berry*

be·ry red. *Thickets.* Bl. June. The leaves vary from kid ey to heart, heart-spear, triangular-spear, or halberd-shap·d.

Use. The root is acrid and stimulating. The young shoots are a good eatable, when dressed like asparagus. Horses will not eat it.—*Withering.*

13. Berberis. *B. vulgaris.* *B. dumetorum.*

Ang. Barberry. Pipperidge Bush.

Gen. Desc. Cal six-leaved. *Petals* six, two glands to the claw. Style 0, berry superior, one-celled, open at the end. Seeds two or three.

Spec. Desc. *Fruit-stalks* forming bunches: thorns three together. *Leaves* change into three-forked thorns, and are succeeded by fresh leaves the next year: anthers burst at the least touch, or at any irritation to the bottom of the filament bend over to the summit. *Bloss.* yellow, streaked with orange. *Berries* red. *In woods and hedges, on chalk hills.* Bl. May, June.

Use. The berries, which are gratefully acid and moderately restringent, are said to be of great use in *bilious fluxes*, and in all cases where heat, acrimony, and putridity of the humours prevail. The Egyptians are said to employ them in *pestilential fevers* and *fluxes* with great success. (*Alpinus Med. Ægypt. L.* 4. *c.* 1.) S. Paulli relates that he was cured of a malignant fever, accompanied with a bilious diarrhœa, by using these berries conformably to the Egyptian practice, viz. macerating the fruit for a day and a night in twelve times its quantity of water, with the addition of a little fennel seed; the liquor strained and sweetened, was used as a common drink. (*Inadrip. Bot.* 118.) These berries do not seem, however, to possess any peculiar advantage over other acid fruits.—*Woodville.* The inner bark steeped in white wine is purgative, and has often been found serviceable in the jaundice. The fruit is cooling and good to quench thirst in fevers, for which it is generally made into a conserve.—*Lightfoot.* An infusion of the bark in white wine is purgative. The leaves are gratefully acid. The flowers, though offensive to the smell when near, afford, at a proper distance, an odour extremely fine. The berries are so acid that birds will not eat them, but boiled with sugar, they form a most agreeable rob or jelly; they are likewise used as a dry sweetmeat and in sugar plumbs. The roots, boiled in lye, dye wool yellow: in Poland, with the bark of the root, leather is dyed of a most beautiful yellow: the inner bark of the stems, with the assistance of allum, dyes linen a fine

 yellow.

yellow.—This shrub should never be permitted to grow in corn lands, for the ears of wheat, that grow near it, never fill, and its influence in this respect has been known to extend as far as three hundred or four hundred yards across the field. Of this, though denied by Mr. Brousonet, *see Eng. Bot. p.* 49, Dr. Withering has experienced the truth.—*Withering.*

Hexandria Trigynia.

14. Rumex. *R. crispus.*

Ang. Curled Dock.

Gen. Desc. Calyx three-leaved. Petals three, closing. Seed one, three-cornered, inclosed in the blossom.

Spec. Desc. Fl. herm. Pet. entire, all beaded. Valves strongly veined. *Leaves* spear-shaped, acute, waved and curled at the edge. *Root* yellow. *Beads* one or three, rarely two. Valves large brown red when ripe. Beads pale when young, changing to blood red, then to brown red. *Pastures, road sides, all soils.* Bl. June, July.

Use. The fresh roots bruised and made into an ointment, or a decoction of them, is a cure for the *itch.* The seeds have been given with advantage in *dysentery.* In Norfolk this plant is the pest of the clover fields. Horses, cows, and goats refuse it.—*Withering.*

15. Rumex. *R. acutus.*

Ang.

Gen. Desc. As above.

Spec. Desc. Valves veinless. *Leaves* oval spear-shaped, uneven at the edges, not entire, not waved or curled. Valves very small, all beaded, entire. Stem and leaves in the sun tinged with red. *Woods, river-sides, roads, commons.* Bl. June, July.

Use. The root is much used by dyers; it gives a great variety of shades from straw colour to a fine olive, and a beautiful deep green to cloths which have been previously blued.—*Stokes.* Cows and horses refuse it.—*Linn.*

16. Rumex. *R. hydrolapathum. Lapathum aquaticum.*

Ang. Water Dock.

Gen. Desc. As above.

Spec. Desc. Fl. herm. Petals entire, beaded. Leaves spear-shaped, smooth, acute, very entire, tapering at the base, a little toothed and waved; lower ones to eighteen inches long; *leaf-stalks* semi-cylindrical, lower ones to fifteen inches long. *Stem* five or six feet high. *Root* within white, without black. *Fruit-stalks* encompassed a little

below

below the middle with an indistinct ring, in half whirls. *Whirls* from alternate sides of stem, surrounded by a skinny sheath. *Cal.* one leaf, three div. *Beads* greenish white or purplish. *Summits* flat, fringed. *Shallow water.* Bl. July, August.

Use. The root, which is the part directed for medicinal use, has a strong austere taste, and readily strikes a black colour to a solution of ferrum vitriolatum; it is strongly astringent, and has been much employed both externally and internally for the cure of *scurvy;* especially when the gums are spongy and frequent hæmorrhages supervene; it is recommended also in various other cutaneous defœdations, and in visceral obstructions. The leaves, which manifest considerable acidity, are said to possess a laxative quality, and have been used to obviate costiveness. Many of this genus were formerly officinal herbs, but this species has been esteemed the most efficacious, and is still retained in the Materia Medica by the Edinburgh College, though the great virtues ascribed to it, are now held in doubt.—*Woodville.* This is a medicine of considerable efficacy, both externally applied as a wash for putrid spongy gums, and internally for some species of *scurvy.* In *rheumatic* pains, and chronical diseases owing to *obstructed viscera,* it is said to be useful. The root has some times a reddish tinge, but soon changes to yellowish brown on being exposed to the air.—*Withering.* The powdered root is one of the best things for a *dentifrice* that can be used.—*Murray App. Med. iii.* 344.

17. Rumex. *R. acetosa. Lapathum acetosum. Acetosa pratensis. Oxalis crispa.*

Ang. Common sorrell. Sorrell dock.

Gen. Desc. As above.

Spec. Desc. M. and F. fl. on distinct plants. Leaves oblong, arrow shaped. *Leaf-stalks* purplish. *Bloss.* reddish. *Male cal. leaf* obtuse. *Female cal. leaf* acuminated, reflexed, waved on the margin. *Meadows and pastures.* Bl. June.

Use. The leaves have an agreeable acid taste; and have been esteemed *refrigerant, antiscorbutic, and diuretic.* It possesses all the medicinal virtues of oxalis acetoselle, and being easily procured in abundance, may be conveniently substituted for it. Taken in considerable quantity, or used variously prepared as food, sorrel will be found of important advantage where a *refrigerant* or *antiscorbutic* regimen is required; Linnæus says that the Laplanders experience

a serum acetosatum to be in this respect an useful and pleasant diet.—*Woodville.* The Laplanders boil the leaves in water, and mix the juice, when cold, in the milk of the rein-deer, which is thus esteemed by them an agreeable and wholesome food, and will keep in a cool place for a long while.—*Lightfoot.* The leaves are eaten by us in sauces and sallads. In France they are cultivated for the use of the table, being introduced into soups, ragouts and fricassees. In some parts of Ireland they are plentifully eaten with milk, alternately biting and sipping; the Irish also eat them with fish, and other alcalescent food. The dried root gives out a beautiful red colour when boiled. Horses, cows, sheep, goats, and swine eat it.—*Withering.*

[To be continued.]

To the Editors of the Medical and Physical Journal.

Gentlemen,

In your Review* of my reply to Mr. Edlin's two cases of gout, occurs the following remark. "In some concluding observations the author gives a case, in which the hot treatment of gout proved fatal. Though we have no doubt of the truth of every thing here stated, yet we wish, for the sake of the incredulous part of the public, that the name at least of the consulting physician had been added. We are aware that this cannot always be done, from motives of delicacy to the surviving family of the deceased; but we regret the want of it exceedingly in this case." The omission here regretted, was occasioned by the physician alluded to, being dead; the mentioning of which circumstance, it was thought, would tend to draw undue suspicion on the credibility of the case. However, as the suppression of the name is lamented, it behoves me to disclose it. The physician referred to was the late Dr. Vivian of Oxford. The widow, and several children of the deceased patient, are still living, and shall likewise be made known to any person who would wish their attestation of the facts stated in my detail of the case. I am, &c.

Taunton, May 20, 1805. ROBERT KINGLAKE.

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* See Medical and Physical Journal, No. 75, p. 464.

CRITICAL ANALYSIS
OF THE
RECENT PUBLICATIONS
ON THE
DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

"*Coup d'Œil sur les Revolutions et sur la Reforme de la Medicine; par* P. J. G. Cabanis, Membre du Sénat Conservateur, &c. Octavo, pp. 438. Paris, An. xii.—1804."

We feel considerable satisfaction in laying before our readers this work of M. Cabanis, which, although published only lately, was composed about ten years ago, at the suggestion of Garat, who was, at that time, Commissioner of Public Instruction, and who was busily employed in organizing, on an enlarged and comprehensive plan, all the branches of education. It was, however, the original design of the author, after having given a rapid sketch of the different revolutions in medical science, and pointed out, in a summary manner, the general principles which should guide and direct its reform, to have considered very fully the application of the *analytical method* to the study of Medicine, on which he conceives its farther advancement, in a great measure, to depend. The desire of accomplishing this object retarded the publication of his work, till loss of health deprived him of both the hopes and means of completing his design, and induced him to lay before the public the introduction of his work, the only part which he has been able to finish. The performance, however, even in its present state, must be regarded as a very valuable acquisition to medical literature; and although it may not recommend itself by the novelty of the subject, yet it distinguishes itself, in an eminent degree, by the justness, originality, and discrimination of the views it contains, and bears decisive marks of a bold and penetrating genius. We regret that our limits prevent us from entering into a detailed analysis of the work and confine us to a few extracts, which, however, it is hoped, will serve to justify our opinion of its merits.

"At a time," (says M. Cabanis, after some preliminary remarks on the necessity of a medical reform) "when all the branches of science are, in some measure renewed, those physicians who are endowed with any portion of philosophy, should regard it as a duty to unite their efforts for accomplishing this great reform of their science and their art. The enlightened state of the age will allow it to be more complete and more permanent in its effects, than even Hippocrates could have rendered it in his time. In that rapid and progressive impulse which has been communicated to all the

the branches of human knowledge, it would not be sufficient to execute the reforms, which are required merely for the present moment; we should endeavour to pave the way for those which, in the course of time, may become necessary; for all ought to be directed by the same spirit, if not executed on the same plan. Witnesses of the daily advances which are made in the other branches of physics, to which men of genius have applied the true methods of inquiry, physicians surely cannot be excusable, if they suffer the beautiful and extensive science which they cultivate, to remain buried under that crude and undigested mass of materials, which observers have so often collected without discrimination, and which theorists have applied to practice without judgement or examination. Surrounded, as they are, by objects so various, so fugitive, so delicate, and in the examination of which the least aberrations of reasoning or deduction lead to the most dangerous errors, they certainly will not be permitted to tolerate a vague and inaccurate language, capable of obscuring the most simple truths, and of giving to the mere fictions of the imagination all the appearances of reality. The time is come when Medicine shall be placed on a footing with the other sciences, and when their mutual relations shall be determined with precision. Placed between Physics and Moral Philosophy, it is of peculiar importance to ascertain and point out distinctly its true relations to each of these sciences. It must borrow the strict and precise language of the former, and the liberal and communicative spirit of the latter. It must take advantage of all that the intellectual philosophy has most rigorously established in its theories, and of all the nice and delicate illustrations which its application to the sensitive frame presents to view. In fine, after having, by the sure methods of observation, experiment and induction, reduced its principles to a regular system, it will be necessary that the improvements in the plan of instruction, should form and fit for practice a set of minds, at once profound and comprehensive, firm and supple, who join to the light of a superior understanding, that knowledge of life and manners, and that facility of action, without which all the gifts of nature and of art are almost entirely useless. Happy combination, perhaps even indispensable, for preventing the practice of a science, of which the subjects are so various and so delicate, from becoming a mere scourge of humanity." P. 5—7.

The following observations on the discovery of the circulation of the blood, appear to us worthy of notice:

"The new light which was thrown upon the animal economy by this important discovery, served only, we may affirm, to redouble the rage of systems. Nothing else was thought of, but to cause the blood to circulate more freely, to destroy its viscosity, to draw off from the body that which was supposed to be corrupted, to purify it, correct it, and renew it, and to preserve the blood-vessels in a relaxed and pervious state. Hence those torrents of aqueous and diluent drinks, with which Bontokœ and his adherents inundated

dicted their patients. Hence that sanguinary fury, which the partisans of Botalli thought themselves entitled to put in execution, in their treatment of all sorts of diseases; a fury, which although so often damped by systematic murders, has only ceased for intervals, and still from time to time reappears in the schools. Hence, too, that wretched mania of the transfusion of blood, of which the practice almost always deprived those, who had the temerity to subject themselves to so dangerous an operation, of their reason, or their life.

"Thus, one of the most beautiful discoveries of modern medicine, far from elucidating the practice of the healing art, as there was every reason to expect, only had the effect of misleading weak imaginations, dazzled by its splendor. And it may even still be doubted, whether its application to the knowledge and cure of internal diseases has been of any real use. In surgical cases, even where its assistance is most generally regarded as indispensable, might not observation almost always supply its place? And must we not limit its importance to the elucidation of a point in Anatomy and Physiology, very curious, no doubt, in itself, but which, if it did not indirectly affect many other interesting questions regarding the animal economy, would, perhaps, have contributed very little to our knowledge of its true laws.

"However, under this point of view alone, the discovery of the circulation has rendered services, by which the practice of Medicine has eventually profited, and the glory of its authors can no longer be contested, by the most ridiculous envy, or the most absurd and inconsiderate attachment to paradox." P. 166—168.

We shall subjoin the following remarks on the improvements of Medical education.

"It must be sufficiently evident, that the views, which direct the reform of Medicine, are the same with those which should govern and regulate its instruction. They alone can supply a good plan of education, and a good system of lectures in every branch of it. One very essential point to be attended to, is always to present, to the pupil, the objects in their most natural order, i.e. to begin with the first or most easily known, and, by their assistance, slowly and gradually to proceed to those, which require more profound attention, more skillful examination, or, perhaps, even new methods of research. It ought to be the study of the teacher to develope the ideas of his scholar in the order of their formation, or in the same order in which the objects conjunctly, and their parts in detail, are presented to our view. And the pupil, in particular, after having seized the chain which unites them, must review it from the first to the last link, taking care not to overlook any of the intermediate links, which the mind does not immediately, and, as it were, necessarily, suggest." P. 307—8.

"It is in the eighteenth century, that the system of instruction has made real progress. To the jargon of the schools has succeeded a language, more pure and more precise. The improvement of

of mathematical methods; the employment of more accurate means of investigation in physics and in natural history; that philosophical spirit, which, by degrees, has become universal; that refinement and taste, which the numerous master-pieces in literature and the arts have rendered a sort of want, for the polished class of society in every country, have at last, forced the schools to cast off their barbarous rubbish. Reason surrounded them, and assailed them on all sides; and even took possession of their benches. Justice is now done them. They have long bravely combated against common sense, and we may even perceive, that their impotent remains would be ready to renew the contest; but reason has conquered; folly has been overthrown, and, in spite of all its efforts to rise again, must for ever remain so. The duration and the obstinacy of this shameful conflict are precisely the circumstances which preclude the possibility of a return to ancient methods or to ancient errors, in favour of which latter alone the former are of value in the eyes of a certain description of people. Doubtless those men, who are the firm and faithful votaries of truth, will, in all ages, be attacked by ignorance, and persecuted by hypocrisy; but the triumph of their cause is for ever secured. Many branches of human knowledge have attained a sort of perfection; a rich store of materials is collected for others; it only remains for us to apply the true methods of research to all equally; and in particular, to apply them with equal strictness to all the branches of instruction." P. 182—3.

The section on the alliance of Moral Philosophy with Medicine, contains so much just and forcible reasoning, that we are induced to transcribe it at full length.

"We have already shewn," says M. Cabanis, "that all the intellectual sciences should be founded on the physical knowledge of the human body; but we should have a very imperfect idea of the latter, if we neglected to study those organic functions which conspire to produce thought and volition, and to take into view that influence which both these operations exert on the whole, or on particular parts of the sensitive frame. Thus we see, that metaphysics and moral philosophy are equally necessary for the physician. On the first of these we have already sufficiently expatiated. With respect to the second, as it is almost constantly connected with the details of practical medicine, it seems as if it were the sister, rather than the attendant, of the latter. The errors of the imagination, or those of the passions and desires, are evidently the causes of a great proportion of the miseries of man. The diseases even to which he is subjected, generally depend on his own errors, or on those of society, and are always liable to aggravation from the depraved state of his moral constitution. How much may erroneous opinions and irregular desires disturb the functions of the system! How many vicious habits may they not generate in the different organs of the body! and if it be true, that vice, like insanity, is often but a physical disease, how often, in their turn, are diseases

diseases produced, either by insanity, which, generally speaking, may occasion disorder in all the living actions of the system; or by vice, which in reality is merely a variety of the former.

"The physician is doubtless unfit for his profession, who has not learned to read in the human heart, as well as to recognize the presence of the febrile state; or, who in treating a diseased body, cannot distinguish, in the features, in the looks, or in the speech, of his patient, the signs of a disordered mind, or of a wounded heart. How can he seize the true character of these diseases, which are concealed under the semblance of mental emotion, or of those several disorders, which exhibit all the symptoms of certain physical diseases? How can he restore its wonted serenity to that agitated mind, to that soul consumed by a gnawing melancholy, if he is ignorant of the organic lesions, which these moral affections may produce; and of the derangement of the functions with which they are generally connected? How can he revive the dying flame of life, in a body drooping, or devoured by anguish, if he knows not what sufferings he must first alleviate, and what idle dreams he must first dispel?

"Doubtless, it is the duty of the physician to afford the sweetest and most soothing consolations to the patient couched on the bed of sickness; it is he alone, who can penetrate farthest into the confidence of infirmity and misfortune, and therefore it is he who can pour the most salutary balm into their wounds. But, for the same reasons, he must not remain ignorant of the nature and destiny of these unhappy and too feeble mortals; he must not be void of compassion for those errors and miseries which so readily may become the lot of every one; but he must be indulgent and kind, as well as circumspect and reasonable. Every one else may hate vice, and be revolted at folly; but the physician, if he knows how to observe and judge properly; if he possesses good sense, if he is just and liberal in his sentiments, can only feel pity for both; and can only redouble his zeal for the service of those degraded and unfortunate creatures, who ought to excite his compassion more forcibly, the more that they are insensible to their own unhappy state.

"Who has not had an opportunity of seeing some unfortunate beings, victims of their own fatal passions, drag on a languishing existence towards the tomb, while they sought for some expressions of concern, rather than for life? Who has not observed the cruel agitations of those terrified imaginations, who tormenting themselves with the tortures of their own fancy, combine sometimes, with this mania, sentiments of the sublimest virtue? Can there be a more grateful enjoyment, then, than to allay those groundless alarms, those fictitious terrors, to cause the voice of reason to be heard amidst their numerous perplexities? Those persons who evince the greatest sensibility and compassion towards others (and such persons are most liable to all sorts of error) surely deserve the most particular attention on the part of the virtuous and feeling physician.

cian. Could any one, who is not completely ignorant of the sentiments which form the human heart, could any one avoid being deeply affected at the sufferings of those, who never witnessed the sufferings of others, without feeling an anxious wish to relieve them? Could they be sparing of their care and attention to those who live only by their social affections?

"But to return to considerations more strictly medical, we may observe, that methods of cure, which often are simple and uniform, when applied to individuals, whose minds, or whose sensibility, have received but little culture, become very complicated, various, and difficult, when directed to persons whose faculties have been more completely developed. How many fibres may be agitated by the slightest causes, when the mind receives and combines a variety of impressions, and when many vivid emotions animate the breast! Not to speak of the habits which are contracted by application to different trades; whenever one emerges from the sphere of mere animal life, whenever one becomes separated from the common class of society, the treatment of each disorder demands particular combinations of ideas, and frequently combinations of ideas which do not relate to the disease itself. Thus, the practice of Medicine is reduced to a few simple rules in the country, and in hospitals; but it is obliged to multiply, to vary, and to combine its resources, when applied to men of business, to men of letters, and to artists, and to all persons whose lives are not devoted to mere manual labour." P. 420—5.

The Edinburgh Medical and Surgical Journal, exhibiting a concise View of the latest Discoveries in Medicine, Surgery, Pharmacy, &c. No. 2. April, 1805.

At length the 2d number of this useful publication has appeared; and if the table of contents is less showy, it is at least adorned with as respectable names: if the original communications occupy less space, they are more numerous; and their want of bulk is supplied by an anonymous communication. We trust, the encouragement of the public will keep pace with the industry of the managers; and also, that such encouragement will increase, instead of diminishing their exertions.

The first paper may be called a continuation of the fifth of the last number, being a communication from Mr. Astley Cooper, of the deficiency, in a female, of all the parts anterior to the urinary bladder, and of the anterior portion of that viscus, the posterior part projecting through the aperture in the abdominal muscles, where it formed a tumour, on the surface of which the ureters opened. As this case can afford no practical remarks to the faculty in particular, we shall transcribe the introductory part, as a moral lecture to every individual in this christian country.

"Am

"Ann Carter, aged 22, was admitted, on the 4th of March, 1803, into St. Thomas's Hospital, under the care of Mr. Cline, on account of a fungous tumour on the lower part of the abdomen, through which the urine was involuntarily discharged. This misfortune she had laboured under from her birth; but when she arrived at the age of puberty, her situation, in that part of the country in which she was born, became insupportable to her feelings, on account of her infirmity being known. She therefore resolved to seek her subsistence in London, where she vainly imagined it might escape detection, and she soon procured the situation of a servant to a family in town; but being unable to retain her urine, her clothes were rendered offensive by it, and her bed was nightly wetted. Her infirmity was thus soon discovered by her employers, and she was dismissed from their service. By frequent disappointments of this kind, she was reduced to seek a miserable subsistence by begging, and spent days and nights in the streets of London, until, becoming ill, from the effects of want and exposure to the severity of the weather, she was carried, by the police, to an hospital; and when admitted into St. Thomas's, she was so much reduced, by poverty and sickness, that she died on the 8th of March, four days after her admission."

An account of the dissection follows, with the accuracy we might expect from such a source, illustrated by a wooden sketch, which we think, even in such materials, need not have been so coarse and confused.

This history is followed by a conclusion of the paper before referred to, and contained in the 1st number. Though there is nothing objectionable in the remarks, yet, we are of opinion, many of them might have been spared. The principal merit consists in the diligence with which so many cases have been collected from various sources, by which the reader could not fail to mark the general analogy, without the assistance of the compiler. We hope we shall be excused giving a gentle hint on the application of terms. When we read, "Mr. Cooper mentions, if Ann Carter got any thing to drink," we could not help referring to the passage, to see if such were his words. We mention this, because, though no one who is acquainted with the English language and Mr. Cooper, will suspect him of using such an expression, yet with others it may pass for an authority.

The third article is entitled, "Observations on the Yellow Fever of America, tending to prove, that it does not depend on any peculiar modification of the atmosphere; that it is not preceded by any malignant change in the type of other diseases; and that it is not attended with carbuncles, or glandular swellings. By Dr. James S. Stringham, Professor of Chemistry in Columbia College, New York."

This paper, at least, shows the great difficulty of arriving at truth, if no other advantage can be drawn from it. It is strange that there should still be any kind of doubt, relative to the exact description

description of a disease which so regularly occurs, and which so many physicians have witnessed in every stage. We shall not, however add to the embarassments which may arise from these differences of opinion; for if men on the spot cannot agree on subjects the most obvious to the senses, it is not likely that we, at such a distance, should reconcile them: we only wish, that they would be careful to take notes whilst engaged in the treatment of their disputed cases; or, if they have taken notes, that they would favour the public with them.

"Observations on the Muriate of Lime, in the Cure of Scrofula, and other States of Debility. By JAMES WOOD, Physician to the Newcastle Infirmary and Dispensary."

DR. WOOD scruples not to assert, that, in many respects, muriate of lime possesses advantages over muriate of barytes, in the same proportion that the vaccine does over the variolous inoculation. Besides its much more certain efficacy, the facility of exhibiting it is equally great, since we may give a full dose of the muriate of lime, at first, without the cautious gradation which so much retards the benefit we expect from the former composition. Some directions follow, relative to the manner of preparing and exhibiting the remedy.

"Case of an encysted Tumour occupying the greater Part of the posterior Portion of the right Hæmisphere of the Brain. By P. BATEMAN, M. D. F. L. S. Physician to the Carey-street Dispensary, and to the Fever Institution."

THIS is, in many respects, a very valuable case; for though no practical inferences can be immediately drawn from it, yet it adds, at least, some little towards the pathological knowledge of a part the most important, and the most obscure. The encysted tumour is described as filled with pure *pus.* The cyst was firm, and easily removed, extremely sanguiferous, and scarcely attached to the brain. All the diseased appearances were on the right side; but the paralysis, for some time, confined to the left extremities. The following remarks contain all the inferences we can draw; and are so well expressed, that we shall give them in the author's own words.

"The preceding case is not offered with a view of deducing from it any general conclusion. It seemed valuable, on account of the connexion of the symptoms with the morbid state of the organ, as ascertained by examination after death; and, on that account, worthy to be recorded. We are yet very ignorant of any marks of discrimination, in the living body, of pressure or irritation, as applied to that very complex organ, the brain. The relations of the older anatomists have thrown little light upon this subject, in consequence of the imperfect accounts they have left us of the symptoms. There is a case well related by Platerus, and copied by Bonetus in his Sepulchretum (Sect. *De oculi effectibus*, Obs. I.) which,

which, in the course of the symptoms, somewhat resembles the foregoing case. A tumour, of a smaller size, and greater solidity, than the one before us, being of a substance like the coagulated white of an egg, was found seated in the *anterior* portion of the right hemisphere; convulsions, nevertheless, occurred. From six very valuable cases, which are too little known, from their being published in a work of very limited circulation among medical practitioners (Transactions of the Royal Society of Edinburgh, vol. ii. p. 17) Mr. Anderson, surgeon, in Leith, has drawn the following conclusions.

" 1. When one hemisphere of the brain is affected, it generally produces morbid symptoms on the other side of the body.

" 2. When both hemispheres are affected, the whole body suffers.

" 3. Though only one hemisphere is affected, when the injury is great, the whole body suffers.

" 4. Though the cerebrum alone is hurt, it produces morbid symptoms in all muscles of voluntary motion, whether their nerves arise immediately from the cerebrum, the cerebellum, or from the medulla oblongata.

" 5. In cases of external accident, where one side only is affected, the prognosis is more favourable than when both sides suffer.

" The only other approach to generalization, that I have met with, is, an observation by Dr. Baillie (*Morbid Anat.* p. 457). ' It is worthy of remark here,' he says, ' that, when tumours, of any kind, press upon the thalami nervorum opticorum, or the optic nerves themselves, within the cranium, vision becomes impaired in various ways; and that, when tumours press upon the tuberculum annulare, or the medulla oblongata, convulsions are very apt to occur.' The first part of the observation will, I believe, be allowed by every one to be correct; but the last, I apprehend, is not invariably supported by the records of pathology; and, with the greatest deference to such high authority in morbid anatomy, it may be questioned whether we are yet in possession of a sufficient number of facts to warrant any general conclusion. *Ars longa, judicium difficile.*

Two Cases of Acute Rheumatism, treated with Opium; and some Observations on the comparative Merits of that Method, and of the Treatment which is founded on the Principle of Depletion; communicated by J. J. De Roches, M. D. Physician to the City Dispensary, and Fellow of the Medical Societies of London and Edinburgh.

As each of these patients was purged, and one of them attacked with rheumatism, after chronic diarrhœa, the conclusion of dysentery, we conceive the author's intention could only be to show, that it is possible to evacuate too freely in acute rheumatism, or

to mistake the chronic for the acute disease. All this will not, we presume, be disputed. As to the "nosological dislike to opium in pure inflammation," of which the author accuses the Cullenian school, we conceive, some, at least, of these remarks, might have been spared. The principal objections against opium, in inflammatory diseases, is, that it renders the symptoms less to be depended upon. If the inflammation ceases, opiates are unnecessary for relieving pain. If the inflammation continues, they rarely succeed; but interrupt the effect of the other remedies by costiveness. But where high irritability assumes the appearance of inflammation, which is often the case, opium will prove the cure, especially if preceded by common purges. Sydenham's observation is therefore very just, that, in those cases of rheumatism which require frequent bleeding, and such are by no means uncommon, opiates are, at least, of little avail during the paroxysm, which they too often protract. We fear we have given too much room to this communication; because, if the practitioner has not courage enough to be decided, in these cases, no rules can be of much use to him; and because, as the valuable writer, whom Dr. De Roches is disposed to correct, observes, of another disease, there are some cases so mild, that even the blunders of the doctor will scarcely protract the patient's recovery.

History of a Tumour in the Breast, with some Reflexions; communicated by Henry Reeves, M. D. Fellow of the Medical Societies of London and Edinburgh.

Dr. Reeves apologises for the minuteness of his relations. We not only excuse him; but, whilst we are thankful for the particulars he enumerates, we could wish they had been still more. Among other things, we could wish that the appearance of the tumour had been described with more nicety. "It had," we are told, "the appearance of condensed cellular substance, or hardened steatoma." Does this mean, that steatomatous substance was inclosed in separate cells? A few ounces also of gelatinous substance was discharged by puncture. This, we conceive, must have been contained in a cyst, perhaps similar to the cells which contained the steatoma.

Another not unimportant enquiry remains unsatisfied. The patient first perceived the tumour in September, 1803. The following January she married, and, about that time, the tumour began to increase. "She considered herself pregnant too," we are informed; and, that "this change in her constitution might excite the local diseased action, or, at least, accelerate its progress." As she lived till the following September, it would have been easy to ascertain whether she was really with child or not, unless symptoms of abortion should have taken place, which is not mentioned.

Our readers will, perhaps, see our motives for these inquiries. Dr. Adams, of whose treatise, on the cancerous breast, we gave

so

so long and particular an account in one of our former volumes, takes notice of cells filled with a gelatinous substance, and others with steatoma. These he seems to consider as possessing a similar life with carcinoma, and multiplying in the same manner. The case above affords some illustration, at least, of this theory.—Two other remarks are found in the same author. The first, that if the disease attacks a young subject, without a previous injury, it not only proves fatal, as in other cases, but more rapidly so. The second, that in all such cases as have come to his knowledge, the patient has been either single, or without children if married.

Added to this melancholy case, we have that of her sister, who, refusing to submit to an operation which, she saw, had proved unsuccessful, only protracted a more miserable existence.

On the whole, these cases are highly valuable; and if more particulars can be collected, we hope to meet them in a succeeding number.

Case of Cancer of both Testicles, which terminated favourably by the Supervention of Scurvy; communicated by JOHN LIVINGSTONE, Surgeon of the Cirencester.

THIS is a very valuable case, in every point of view. We shall not, therefore, engage in any controversy relative to the nature of the original distemper; but heartily thank the Editors and Mr. Livingstone, for recording the particulars as they are.

Practical Obversations on the Pneumonic Diseases of the Poor, by CHARLES BADHAM, M. D. Physician to the Westminster General Dispensary.

PULMONARY complaints are too much confused by systematic writers. In so uncertain a climate as ours, and in a town where the labouring poor are so much exposed to the vicissitudes of season and weather, they become a most important object of inquiry; and Dr. Badham has shown, that the opportunities the Dispensary has afforded him have not been neglected. His remarks on the frequency of pleuritis in children, and the necessity of copious bleeding, are amply confirmed by occurrences in dissecting rooms; and, we trust, the practitioners of the metropolis are daily becoming more sensible of these truths.

Pleuritis rheumatica next comes under the doctor's notice, and his remarks are not less important; if they are less perspicuous and decided, this arises from the greater intricacy of the subject.

Lastly, those chronic pectoral complaints which, after a few winters, often end in incurable hydrothorax, are well marked. Some general observations follow, on effusions of water into the chest, which the author considers as by no means so generally fatal as Dr. Cullen, and some other writers, have supposed. The frequent fatality of the disease he imputes rather to the previous causes, of which this is only the concluding symptom.

Historical and Critical Analysis of the Functions of the Skin, by GEO. KELLY, M. D. Leith.

THIS is an useful and ingenious paper; its title speaks its contents. We sincerely hope the author will increase the number of well-authenticated experiments on this important subject.

The last original communication is anonymous; but superscribed, The Enquirer. The first enquiry is, "What are the comparative Advantages of the different Modes proposed for the Treatment of Ulcerated Legs?" The paper contains nothing particular to recommend it.

Such are the original communications of this number. The analytical part follows; on which, we conceive, it becomes us to be silent.

The Medical Intelligence contains an Account of the new Arrangement made in the Medical Department of the Navy;—a Report from one of the Dispensaries of the English Metropolis;—a Recipe for Tinea Capitis;—a long Paper on the Progress of Vaccination;—a Description of a Car for conveying sick and wounded Troops;—a Case of Hernia, in which the gut protruded between the muscles of the abdomen, somewhat above the ring, and afterwards followed the course of the common inguinal hernia, with other peculiarities which the nature of the case produced;—a List of intended Medical Publications closes the number.

An Address to the Medical Practitioners of Ireland, by SAMUEL B. LABATT, *M. D. Licenciate of the College of Physicians, and Secretary to the Cow Pock Institution, North Cope Street, Dublin, 8vo. p.* 136. 1805.

THIS is the best compendium of vaccination we have yet met with. It contains an abstract of all that has been written on the subject, carefully detailing the common appearances, and afterwards marking those peculiarities which sometimes occur, distinguishing such as are no objection to the success of the operation, from such as render it uncertain, or have been found marks of spurious pustules or vesicles.

After an historical account of the discovery, and subsequent practice, of vaccination, the author divides his work in the following manner.

"1. Local appearance and progress of inoculated cow pock, under its most perfect form.

"2. Remarks on its several stages, and the minute differences which are commonly observed therein.

"3. Varieties frequently observed, but which are not incompatible with the genuine disease.

"4. Deviations of greater magnitude, or suspicious cases.

"5. Distinctive marks of spurious cow pock, with suggestions of some of its probable causes.

"6. Constitutional symptoms.

7. Inocula-

"7. Inoculation.—The mode of conducting it, and circumstances to be attended to in the state of the patient, and the medical treatment of the complaint. The best modes of preserving the virus."

Under the last article the author very justly observes, that practitioners have sometimes made too light of the practice; in consequence of which, some patients have been guilty of excesses, and made use of exertions which would scarcely have been prudent, even if virus had not been inserted. We would also add, that, by thus magnifying the simplicity of the practice, and speaking of it as uniformly innocuous, some people have been rendered incredulous as to its prophylactic properties; and others have conceived themselves deceived, or improperly treated, when any unfavourable accidents have occurred.

The work concludes with an apology for the minuteness with which many apparently less important articles are described. For our parts, we have been so little fatigued with perusing this account of a subject so long familiar to us, that we could have been glad if Dr. Labatt had oftener added his own remarks to the authorities he quotes. However, we applaud very much his extreme caution, and shall, on that account, be always particularly happy in receiving his original communications.

An Address, delivered at the Small-Pox and Inoculation Hospitals, on Wednesday, April 3, 1805, previous to the Funeral of WILLIAM WOODVILLE, *M. D. Physician to that Institution, who died there on Tuesday, March 26, 1805, by* ANTHONY HIGHMORE, *Secretary. Printed at the request of the House Committee.*

DR. WOODVILLE, it seems, for a few weeks before his death, resided in the Hospital, having no near connections in London to *receive his parting breath.* The present encomium is handsome, without flattery; and minute, without prolixity. It seems to flow from long habits of friendship, originating in continually labouring in the same vineyard, and strengthened by a good opinion, which long acquaintance could not but confirm.

Dr. Jackson, on the Treatment of Fevers.

(Continued from vol. xiii. pp. 564.—567.)

"It is a common observation, that excitability is ordinarily connected with, or influenced by, the operation of heat. Hence an increase of the degree of superficial heat, promoted, even by artificial means, presents itself as a cause calculated to ensure effect. The presence of heat, however produced, is also considered as a general index of forming a judgement of the result.

"That the state of excitability, is the cause upon which cold bathing acts as a remedy in the cure of fever, is so clear, as not to require any proof; that heat is frequently an accessory cause

 of

of excitability is also true. The author has always considered the subject on this ground; consequently, where the excitability of the surface was deficient in the actual circumstances of the case, his efforts were uniformly directed to the raising of it artificially to a point, where it becomes capable of an easy impression. It must, however, be remembered, that excitability, or rather susceptibility, is not suppressed or dormant from the operation of one cause only, or expressed in one condition simply: hence the means required to restore it, must have a corresponding variety. Torpor is unfavourable to action of every kind; and torpor, connected with plethora, stagnation in the venous system, and suppression of secretions, is unfavourable to the action of cold bathing. In this case, susceptibility is restored by bleeding. Torpor arises from other causes; and susceptibility is restored by other means, viz. by increasing the heat of the sick apartment, where the weather is cold and damp; by frictions of the skin; and particularly by warm bathing.

" The rule of measuring the heat by a thermometer aims at exactness; but it is defective in application, for it does not touch all the circumstances of the case. It will be found, upon trial, that sensation gives a better idea of morbid heat than a thermometer; in short, measure by sensation is that to which we must at last resort. A thermometer only measures absolute quantity; it gives no information on the subject of quality, whether of the kind consistent with life, or of the kind which indicates the presence of a process leading to disorganization and destruction. It is commonly known, that increase of heat is usually a symptom in fever; and it is admitted, in this place, that a certain condition of increased heat,—but not every condition, furnishes an indication for the employment of cold bathing. It is possible that excess of heat may exist, and it actually does exist, without superficial excitablity; that is, without a due share of sensibility of surface, both in the early period, and in the latter stages of fever. Such condition of fever is common in spring, common with Europeans, soon after their arrival in tropical climates, both at the commencement, and in the after period of the disease, either as connected with plethora, or with internal congestion. The heat is then often ardent,—particularly on the trunk of the body. A thermometer, in this case, proves a fallacious guide. It indicates a high temperature; but experience proves, that cold bathing does no good;—it probably does harm in the case connected with internal congestion. To trials in such cases, it is believed the credit of this remedy has been often sacrificed in the fever of the West Indies, and probably in the fever of America. But further, if an increase of heat, as indicated by the thermometer, or even by sensation, be considered as a circumstance uniformly necessary for the safe and useful employment of cold bathing, the remedy will be denied to that numerous class of fevers, in which the skin is moist and soft, cool, even cooler than natural,

though

though retaining an equal share of the life and sensibility, which yet continues to animate the frame; a case not uncommon in warm climates, where tremors, startings, and faintings, make prominent features of the disease. Here, washing with cold water, at least with cold salt water, is known to be singularly beneficial. If it then be true, that cold bathing is useful without an apparent excess of heat, and that an excess of heat may exist where cold bathing is not useful, it is evident, that excess of heat, as expressed by a thermometer, even by sensation, cannot be allowed to be the radical condition, on which the benefits of cold bathing in fevers depend; nor the measure of such heat, the rule whereby to sanction its use. Cause and effect are not separable. Cold bathing always produces effect, where there is a quick susceptibility of impression; where that it wanting, it has little perceptible action. But if cold bathing, independently of this, be supposed to cure fever on the principle simply of abstracting excess of heat, the cure of the disease may be conducted in such manner as never to fail; for cold, in its application, is capable of being carried to the point, not only of abstracting excess, but even of extinguishing just proportion. It is, however, fully proved, that morbid excess of heat may be extinguished, while disease remains; or that processes, destructive of life, may go on in fevers, without any unusual extrication of animal heat. Heat is only one condition, or one expression of deranged action; it is not the uniform and positive cause of the disease, which it ought to be, on the supposition, that abstraction of its excess cuts short the course of the diseased motions. This is so evident, that it would not have been necessary to have said so much in explanation of a matter which is clear, did not common opinion rest the value of the remedy on a supposed abstraction of heat. In that view it is only of limited application; it even appears, if there be any faith in experience, to encounter contradiction, in the point of fact, on that ground. On the other, as acting by restoring the natural rhythm of movement in the organic structure, by the force of a new stimulus, it preserves a consistent, intelligible, and clear explanation throughout.

"The management of bathing in the cure of fevers, is a subject so important in itself, that it will be less blameable to repeat instruction, in some parts, than to leave it defective in others. The general condition, with which the effect is so intimately connected, has been noticed, viz. susceptibility of impression in the whole system, and more particularly in the organ, or system of parts, to which the application is made. It now follows, to notice in detail, the forms and conditions of disease, in which the effects of the remedy are beneficial or otherwise.

"As the good effects are merely relative to the condition of the subject, it is evident, that, if the favourable condition does not exist in the actual circumstances of the case, the first object is directed to the means of giving it. In the first form of fever, noticed

noticed in this place, viz. that connected with plethora, oppression, tumult, and irritation, (seemingly from resistance in the circulating system;) suspended secretions, a dry, hot, and impervious skin;—a condition frequent in the fevers of spring, even of summer, in very hot and dry weather; and in some manner peculiar to Europeans, newly transported to tropical climates; the affusion of cold water on the naked body, has only a slight and temporay effect. It refreshes for a time; it does not change the nature of the disease, or arrests its course. But while cold bathing, applied under the circumstances described, is followed by no material or permanent advantage; yet, where the condition is changed by previous bleeding, carried to the point of arresting the existing movements, and of restoring the susceptibility of impression to other causes; the affusion of cold water, then, gives origin to a train of action, similar to that of health, which, with due care, is eventually confirmed into the healthy habit,—without injury, and without danger of retrograding to its former path. Bleeding and cold bathing, here, furnish a speedy, a safe, and effectual cure for a form of fever, which destroys life occasionally in every country; but which has committed dreadful ravages among Europeans, particularly, among European soldiers in tropical climates. The remedy is comprehended in the means now mentioned; but the effect depends on the management. A scanty bleeding, rarely prepares the condition prescribed for the application of the means; and, unless the condition be duly prepared, the effect is looked for in vain.

" In the second condition of general fever, where there already exists a due share of susceptibility, and more particularly, where there is increased excitability in the surface, the application of cold bathing requires no preparation. The condition exists, and the effect is decisive of health.

" The fevers of the periodic class exhibit great variety of condition; and as the benefits of bathing are relative to condition, so this remedy is sometimes the cause of great good,—sometimes of no value. In intermittents, and remittents not accompanied with signs of internal congestion, in which the hot stage developes freely, tending naturally to a copious and warm perspiration,—cold bathing, properly managed, is capable of eminent good. When the hot stage is completely formed, the application of cold water to the head and shoulders, in repeated affusions, sometimes extinguishes abruptly, generally shortens, the duration of the paroxsym; the succeeding intermission is also more perfect. If care has been taken previously to remove all congestion from internal parts, particularly from the biliary organs, it often seems to suspend the course of the disease, in a similar manner with Peruvian bark. But though this be true, it also ought to be remembered, that where this effect is expected as a result, the expression of the disease ought to be more in the outer circle of the circulation, than in the internal parts; for it is found by experience, that

that cold bathing is less useful in the low autumnal bilious fever of European countries, than in most other kinds of acute disease. The expresssion of febrile action is, in this case, little in the channels of general circulation; the excitability of surface is not strong and permanent; while there is often irritation, and sometimes a congestion in the organic structure of the alimentary canal and biliary system. The good effects of cold bathing, in such case, are not remarkable; and the remedy, when employed, requires to be preceded by a particular management, viz.—by warm bathing, by friction, and warm temperature of air, capable of producing the previous condition, that is, excitability of surface. But even with this management, as the change perhaps can scarcely be rendered complete, the effect is seldom so decisive, as it is in some other forms of malady. Yet, when the condition of a fever so originating, has been changed by accumulation in ships or barracks, or by circumstances of weather and other management, so as to produce a form of disease, the action of which is more particularly manifested in the vascular system and surface of the body, cold bathing resumes its place. Such change often happens, when troops retire from the field into winter quarters; or when they embark in transport ships for foreign service.

"The action of the fever of the contagious character is particularly directed to the skin; consequently the action of bathing, may be supposed to be particularly adapted to its cure. In this form of fever, there are rarely marks of internal congestion:—The first passages—stomach and bowels, receive the first impression of the action of the cause; the superficial parts of the body manifest, more than others, the signs of the first febrile irritation. The skin and superficial parts are differently affected; they are either preternaturally susceptible of impression, with various flying pains and burning sensations; or, they are cold, dull, and torpid. Circumstances so opposite, though fundamentally requiring the same radical remedy, require different means of preparing the previous condition. The first action of the cause of contagious fever, is demonstrably upon the stomach;—a vomit is the first remedy. After the operation of an emetic, the affusion of cold water rarely fails to cut short the course of that form, which is distinguished by heat and superficial excitement. Where the surface is torpid, languid, and greasy; air of a warm temperature, exercise in open air, frictions to the skin, emetics, and warm bathing, as animating and enlivening the surface, precede the use of the final remedy,—the affusion of the cold water. The effect is then, for the most part, complete.

"The good effects of bathing are observed to be most remarkable, where the action of the disease is principally manifested in the surface of the body; they are also considerable, where it affects the muscular parts, or moving powers. Thus, in fevers of the rheumatic form, bleeding, warm and cold bathing, employed in the proper order of succession, and with due attention

tention to circumstances, may be almost always considered as means, effective of a safe and speedy cure.

"In fevers, where an internal local affection is a prominent feature of the diseased action, the good effects of cold bathing are very limited;—the application of the remedy is even sometimes dangerous. It has been observed already, that cold bathing has no very decided power over the autumnal fever of European countries. Cold bathing generally applied, has, in like manner, but little effect over the pure dysenteric form; the application of wet cloths, or wet sponges, to the abdomen; and still more, the sitting down in a tub of cold water, or in a running stream, under the torments of this disease, produce singular relief from tenesmus, and contribute materially to the cure of the malady, whether in the chronic or acute stage. It may be concluded from such example, and the truth of the fact is well ascertained, that the benefit of cold bathing actually depends upon direct application to the part preternaturally excited, or to parts connected with it, by direct continuity; for, when the action of the cause of fever is principally manifested in the organic structure of the superficial parts of the body, the change is great, and the good effects are signal. Where this condition is wanting, the same application does no good. On this ground, the application of cold water in glyster, or the application of cold water to the fundament, as a part continuous with the internal surface of the alimentary canal, gives great relief in the dysenteric form of fever; the same application to the body generally, more especially to the extremities, is usually hurtful. The fact is well established, and it is well illustrated, in the example of drenching persons ill of burning fevers with cold drink. It is proved, that in fevers, accompanied with excessive and raging thirst, the coldest water may be drunk with safety, and without limitation of quantity. If the raging thirst be completely satisfied, the fever, or the paroxysm of the fever, will probably be extinguished without danger, in the same manner as a fever, manifesting its action in the surface, is extinguished by cold bathing. On the contrary, when the surface and external parts of the body are preternaturally excited, the limbs at the outmost stretch of their exertions in exercise, or in travelling, the skin scorched, and the body melting under a burning sun, a draught of cold water, drank suddenly at such a time, often occasions death,—instantly, as a stroke of lightning. The excitement is then in the surface; the cold drink is misapplied, for the stomach is faint rather than thirsty.—But if cold drink, in such case, has fatal effects; washing the body with cold water, is safe and refreshing; for the application is direct to the cause.

"From the different views, in which the subject of cold bathing has now been placed, the circumstances, connected with which, have been noticed, and repeatedly verified by the author, the reader may, probably, be enabled to entertain some idea of the

the mode of operation, and directed into the road of employing it as a remedy upon principle, and with an effect correctly estimated. Its operation consists in exciting a new train of movement, contrary to the existing one, and analogous to that of health. The effect corresponds, in degree of perfection, with the power of the agent, and the susceptibility of the subject; that is, the degree of cold and excitability of the moving principle. It thus often fails, where the power of the agent is weak; as, for example, in hot climates, where the degree of cold cannot be brought near the freezing point; more especially, where there exists, at the same time, a strong morbid impression, blunting sensibility, and rendering the machine less sensible of the impressions of minor causes. The affusion of cold water, judiciously applied to the naked body, at a temperature of thirty-two degrees of Fahrenheit's thermometer, or the rubbing of the naked body with snow, rarely fails to impress the system; to controul the existing movement, though deeply fixed; and to excite a new train of action of a better kind, if the foundations of organization have not been previously loosened or destroyed. The application of snow is powerful; for even where the action of life is suppressed, as in the case of frost-bitten limbs, it speedily restores the part to its natural function. Cold may thus, in certain circumstances, be said to be a power strongly stimulative of animal life. The truth of the fact is familiar.

[To be concluded in our next.]

MEDICAL AND PHYSICAL INTELLIGENCE.

[FOREIGN AND DOMESTIC.]

The following Notice has been transmitted to Dr. Lettsom, *with a request from* Dr. Struve, *to circulate it as widely as possible.*

AUGURAPORY
Of the great and renowned old Magy,
ZOROASTER,
The "Clavis Artis,"

Which is contained in Thirty-nine Books, (which we have translated into German from the Arabian tongue, as faithfully as we were able) from the Year of the World 1996; rendered into German, Anno Christi 1236, by S. V. F. C. R. C.

The following is an Extract from the Preface:

"DURING my fifty years travels I never found this manuscript more than once in the Hebrew, Chaldæan, and Arabic, and then it was esteemed so great a treasure, that it could not have been purchased

purchased for many thousand rixdollars. We were obliged to pay for such manuscripts, most of them being, like the old original, on copper-plates and dragon-skin, 50,000 rixdollars, or £. 8,350 sterling. And we never repented having purchased them so dearly, for it is most minutely specified and clearly demonstrated therein, both generally and particularly, how the most inveterate diseases are to be cured and subdued; we also found the universal key, as to what the Circulatum Majus and Minus is, of what it consists, how it is made and used, insomuch, that one has sufficient reason for concealing this as a secret Work, &c."

Contents of Part the First:

1 Book. Of the Maretz Aqua roris magalis and Aqua grandis.
2 —— Of the Patzlach or Alazagi.
3 —— Of the ♉. Abizar.
4 —— Of the Alacedach, Magnesia Stone, Algir or Pirtre Kies, and how the Philosopher's Stone is to be made thereof.
5 —— Of the Achium, which is found in the Euphrates and Nile and other rivers.
6 —— Of the Aladacha.
7 —— Of the Aajoc or Albativa, also denominated Pithon, the Mother of all Minerals.
8 —— Of the Aladron Microcosmi Adamici.
9 —— Of the Asophol Celuuilatel.
10 —— Of the Mineral Lachamai Asophol.
11 —— Of the Alneat and its secret workings.
12 —— Of the Hadit and Phosphoros and its secret Alazagi or Patzlach.
13 —— Of the Aladeipi and its secret workings.
14 —— Explains how the true *Hyelish* ♉ sapientiæ can be prepared from our *aboriginal* Chaos.
15 —— What is meant by the representation of the Triple-headed Dragon as the ♉, sulphur, and mercury from our old Albaon.
16 —— What is meant by the Red Lion clothed with the Sun.
17 —— How the Red Lion did eat and swallow our Pithon, and then united himself with him.
18 —— How the Phosphoros are to be metamorphosed into the pure Ayr by means of the Pithon, when it is made fixed and △, and is become white Tincture.
19 —— How our treble-headed Pithon is to be augmented and increased.
20 —— How the Algarisen prepared from the Alneat Hadit Phosphoros is to be united to the treble-headed Dragon.
21 —— Of the Albaon and its green and red Spirit; how this is to be united and made the greatest Tincture.
22 —— Of the green Dragon, and the manner of making a sweet ⛣ therefrom.

23.

23 Book. Of the Algir Aladach, and the manner of preparing a Tincture on the Phosphoros in Ayr with it.

24 —— How a high Tincture is to be prepared by means of the Asophol Aceribe.

25 —— Of the true Circulatum Minus et Majus and its preparation.

26 —— Of Maretz; how Mars and Venus, or Man and Wife, as also the true ♉ naturæ is to be made from it, and how the real Universal can be produced by the union of these three.

27 —— Again treats of the Patzlach or secret Alazagi of Metals and Minerals

28 —— Of the true ♉ Abizar, and the manner of producing the △ of the Lord out of it.

29 —— Of the Lapis Algir or Sulphur Gravel; how the greatest Tincture is to be made by means thereof; and with it every disease to be cured, the Philosopher's Stone.

30 —— Of the Achium; how the greatest Tincture is to be made from it.

31 —— Of the Aladacha and its secret Alazagi.

32 —— Of Pithon, and the means of making out of it, in conjunction with Diana or Asophol and the °°° Phosphoros, a Tincture.

33 —— Of Aladron, which comes from the microcosmick World, and the means of making with it, with the assistance of metals, an °°° and Tincture.

34 —— Treats of Asophol Celuuilatel; how a true Alazagi can be made therewith, and with this Alazagi a °°° and *Gluden*, out of which a powerful Tincture can be extracted.

35 —— In which the old Albaon is again mentioned, and the means of extracting from it first a red °°° and then, with the assistance of the ☿ vit. a Tincture.

36 —— Of Alneat; how the Columba Dianæ and a sweet ♉ is to be made from it, and with both of these the greatest Tincture.

37 —— Of Hadit and Phosphoros, and therewith how to make a °°° and a thick substantial Pithon, by means of which the greatest Tincture can be produced.

38 —— How an Aletur and an Arki are to be made from wine, as well as an Aladron, and how these three united, an Almes Aezi is to be extracted and prepared from metals, and therewith a powerful Tincture is to be made.

39 —— How to prepare by means of Asophol a blood-coloured °°° for fermenting Tinctures with, and further how a °°° can be prepared on Pithon by means of ☽ a.

Contents of the Second Part:

1 Book. Treats of the different means of preparing an Acharicho with the aid of Achium in the dry way.

2 —— How to prepare a Liq. out of the Aladron of a vine, in the former of which the Pirtre is discovered; furthermore, how other Pirtre can by a simple boiling be changed into Acaricho.

3 Book How to ripen all unripe Achor, to prepare a Menstruum out of the Microcosmo and Vine, and, in short, how to extract all sorts of sulphura.

4 —— How to make a penetrating Tincture in the proper manner out of Albeta, which is artificial.

5 —— How to prepare an Acures out of Alneat, and with this Acures a red ⁰₀⁰ on Pithon

6 —— Directions for making an Aezi and Acaricho out of Alcubel with the Aladron of the Vine.

7 —— How a light Aezi can be made from the Asophol Aceribe with the aid of Abrasadum, and the greatest Tincture from a preparation of Asophol.

8 —— How an Albeta Adesia can be prepared from Schoschor, Pirtre, and Alneat, and an Aezi is to be extracted and made from this Albeta Adesia.

9 —— Teaches how to make a great Acaricho on Phosphoros in Ayr out of Acus Aschirz.

10 —— How man is to discover his Abimi Impressio Radischo, and to unite himself therewith, as also how he is to recognize his Abimi Fetagi Amaleach, and make use of it in a distinct manner.

It is said in the Preface to Part the Second:

" We were obliged to spare no trouble or expence in procuring the Figures in the Plates to the last 10 Books, because great Mysteries, whereof not a syllable is mentioned in the other Books, are concealed in them, such as the accurate description of the dry Way, the means of preparing in a short time a Tincture with the assistance of *flint*, by melting, which few Authors take any notice of: For Kiesel (*flint*) is a hidden ⊖ alcali, or properly speaking, metakorum, which contains all sulphura within itself, and therewith becomes a Tincture." The original M. S. contains 384 Folio Pages and about 60 painted Drawings of Figures, Characters, &c.; the Text is legible, and the whole Work free from blemish. This M. S. certainly an unique of its kind, is marked No. 1. to shew that it occupied the first place in the *hermetic* Library, whence it came. It is evident from some Remarks in it, that its doctrines have been proceeded upon with success; among others, is this: " It is true, I did not obtain more than 4 oz. from a cwt. but it was excellent, and do not all Kiesel give as much?" The key is added in the margin throughout the Work. This Manuscript, which is to be sold to the highest Bidder, can be valued, without exaggeration, at 80m. rixdollars, or from 13 to 14,000*l.* sterling. The Term of bidding shall last half a year, and all propositions are to be addressed to me as under, free of postage. After receipt of payment, the MS. is to be forwarded to the Buyer in whatever manner he may think fit. Goerlitz, in Upper Lusatia, November, 1804.

I. G. BRAUN, Deacon of St. Peter's.

To

To Dr. Lettsom.

Dr. Struve requests, honoured Sir, that you will make this Work public through the medium of the English Journals. Perhaps, Sir, you may have an opportunity of fixing the attention of some lover of this science on this hermet MS. and therefore permit me to entreat your kind co-operation. I could wish any persons, desirous of treating, might, in the first place, communicate their Propositions to you, and that you would afterwards be so kind as to advise Dr. Struve of the Communication.

I. G. Braun.

A Correspondent, to whom the Editors are indebted for several valuable papers, has requested the insertion of the following

QUERIES.

1. Are not the phenomena which result from the effects of simple vaccination confined to the cuticle and rete mucosum?

2. Does not this view of vaccination, possibly, account for the absence of fever and eruption?

3. When constitutional affection does occur, is not this sympathetic?

4. Is not the sequela after vaccination ill described by the term cicatrix?

5. Does not that which we have been accustomed to call cicatrix denote previous suppuration, and loss of the cutis vera at least?

6. Is not the only loss or sloughing in the process of vaccination, that of the rete mucosum?

7. Do not the rete mucosum and cutis vera both generally slough in the small-pox?

8. When the vaccine principle reaches accidentally the blood vessels, is not this an error loci, a cause of constitutional affection, and source of irregularities and anomalies?

9. Cannot the areola be explained consistently with this view of the cow-pock?

N. B. These Queries are very respectfully submitted to Mr. Ring, Dr. Walker, and your other Correspondents.

Dr. Trotter, of Newcastle, is preparing for the Press, An Enquiry into the increasing Prevalence, Prevention and Treatment of those Diseases, commonly called, Nervous, Bilious, Indigestion, &c. This Work, which has engaged his attention for a number of years, is purely practical, though he attempts a General Doctrine on the subject. Certain it is, in the present day, complaints of this class form by far the greatest proportion of all the diseases which come under the knowledge of the physician. It must therefore be not only curious but useful, to contrast the health of the savage state, and the days of chivalry, with the modern condition of commercial society. The influence of these diseases is to be observed in the characters of nations

nations as well as families, and claim alike the attention of the patriot and parent. The effects which mercury, opium, tea, &c. have in their production, are duly considered; and what relates to the cure, is founded on the experience of some thousands of cases, diversified by character, sex, age, rank, employment, climate, &c. and on more extensive intercourse with the different conditions of mankind, than has usually fallen to the lot of one physician.

Non his juventus, orta parentibus
Infecit aquor sanguine punico.

Dr. Adams, the new Physician to the Small-Pox Hospital, whilst preparing his second edition of "Morbid Poisons," has found time to put together a small Tract, which he calls, "Answers to all the Objections hitherto made against Cow-pox." It is written in a popular style, printed on a cheap paper, and sold for the Benefit of the Hospital.

A Treatise will appear in a few days on the Process employed by Nature in suppressing the Hæmorrhage from divided and punctured Arteries, and on the Rise of the Ligature, concluding with Observations on Secondary Hæmorrhage; the whole deduced from an extensive series of experiments, and illustrated with fifteen plates, by Dr. Jones, of Barbadoes.

A Treatise on the Anatomy of the Human Ear, by Mr. J. C. Saunders, demonstrator of practical anatomy at St. Thomas's Hospital, and surgeon of the London Dispensary for Diseases of the Eye and the Ear, will shortly make its appearance. It will be illustrated by a series of engravings, which represent the organ precisely of its natural size. The engravings will be executed in the best style, and will be made from drawings taken by an excellent artist from dissections of the recent ear. The engravings will shew, in succession, the different parts exactly in their natural position, and, taken together, will form a complete demonstration of this complicated organ.

Dr. S. H. Jackson has in the press, an Inquiry into the Nature of the Disease which so lately prevailed at Gibraltar, with Remarks on Epidemic Fevers in general.

Dr. Harty will publish in the course of the present month, a work entitled, Observations on the simple Dysentery and its combinations, containing a review of the most celebrated authors who have written on that subject, and likewise an investigation into the Source of Contagion in that and some other Diseases.

The late Dr. Garnett's Zoonomia, or popular Lectures on the Laws of Organic Life in Health and Diseases, is in the course of delivery to the subscribers.

Dr. Dennison and Dr. Squire will on Tuesday, the 9th of July, begin a Course of Lectures on the Principles and Practice of Midwifery, and the Diseases of Women and Children.

To CORRESPONDENTS.

Communications are received from Dr. Walker, Mr. Simmons, Mr. Bishopp, Mr. Gillespie, Mr. Pulley; and several anonymous signatures, on the subjects of Gout and Vaccination.